Form 3160-5 (November 1983) (Formerly 9-331)

(De

UNITED STATES SUBMIT IN TRIPLICATE (Other instructions on reverse side)

Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985

5. LEASE DESIGNATION AND BREIAL NO.

	!	3-4V	74VJ-21	125	±	
3.	ţF	INDIAN	, ALLOTTEE	OR	TRIBE	NAME

OPERATOR	8. FARM OR LEASE NAME
GAS OTHER	7. UNIT AGEREMENT NAME
SUNDRY NOTICES AND REPORTS ON WELLS not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)	Navajo Tribal
BUREAU OF LAND MANAGEMENT	14-20-203-2034 6. IF INDIAN, ALLOTTEE OR TEIN

well P NAME OF Marmac Petroleum Company Navajo Tribe of Indians "F 9. WBLL NO. 3. ADDRESS OF OPERATOR 2120 South Holly Suite 207, Denver, Co. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)

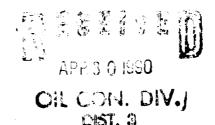
At surface 148 10. FIELD AND POOL, OR WILDCAT Horseshoe Gallup 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 1200' FNL & 1410 FEL 9-31N-17W 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 12. COUNTY OR PARISH | 13. STATE NM

5221' Gr San Juan 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO:

				i .	-		
	r		[]				
TEST WATER SHUT-OFF	~	PULL OR ALTER CASING		WATER SHUT-OFF		REPAIRING WELL	
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CASING	
SHOOT OF ACIDIZE		ABANDON*		SHOOTING OR ACIDIZING		ABANDON MENT [®]	
REPAIR WELL.	\mathbf{x}_{-}	CHANGE PLANS	_	(Other)			
(Other) ,			<u> </u>	(Norm: Report rest Completion or Reco	uits of multiple supletion Repor	e completion on Well t and Log form.)	J

17. DESCRIBE PROPOSED OF COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

We plan to repair this well and return it to production.



THIS APPROVAL EXPINES AUG 01 1990

Production Supervisor TITLE ÉDWARD J./DE (This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY: Ken Townsend AREA MANAGER *See Instructions on Reverse Side FARMINGTON RESOURCE AREA