

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

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

SUNDRY NOTICES AND REPORTS ON WELLS

(Do 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. 14-20-203-2034
2. NAME OF OPERATOR Marmac Petroleum Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Tribal
3. ADDRESS OF OPERATOR 2120 South Holly Suite 207, Denver, Co. 80222		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1200' FNL & 1410 FEL		8. FARM OR LEASE NAME Navajo Tribe of Indians "F"
14. PERMIT NO.		9. WELL NO. 148
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5221' Gr		10. FIELD AND POOL, OR WILDCAT Horseshoe Gallup
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 9-31N-17W
		12. COUNTY OR PARISH San Juan
		13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR 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.

RECEIVED

APR 30 1990

OIL CON. DIV.)
DIST. 3

THIS APPROVAL EXPIRES AUG 01 1990

18. I hereby certify that the foregoing is true and correct

SIGNED

EDWARD J. DE JONG

TITLE

Production Supervisor

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

DATE 2-9-90

APR 24 1990

Ken Townsend

FOR AREA MANAGER
FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side