| Form | 9-331 |
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| (May | 1963) |

DEPARTMENT OF THE INTERIOR (Other Instructions on reverse side) GEOLOGICAL SURVEY

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

N00-C-14-20-5379

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

| SUNDRY | NOTICES | AND | REPORTS | ON | WELLS |
|---------------|----------------|-----|---------|----|-------|
|---------------|----------------|-----|---------|----|-------|

| (Do not use this form for proposals to drill or to deepen of plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.) | Navajo Allotted |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| 1. | 7. UNIT AGREEMENT NAME |
| OIL GAS OTHER | : |
| 2. NAME OF OPERATOR | 8. FARM OR LEASE NAME |
| Dome Petroleum Corporation | Navajo Allotted 16 |
| 3. ADDRESS OF OPERATOR & Minerals Management Inc., Suite 105, | 9. WELL NO. |
| 501 Airport Drive, Farmington, New Mexico 87401 | 1 |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. | 10. FIELD AND POOL, OR WILDCAT |
| See also space 17 below.) At surface | Papers Wash Entrada |
| | 11. SEC., T., B., M., OR BLE. AND SURVEY OR AREA |
| | SEC. 16, T19N, R5W |
| 2310' FSL, 330' FEL, SEC. 16, T19N, R5W | NMPM |
| 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | 12. COUNTY OR PARISH 13. STATE |
| 6591' GR | McKinley N.M. |
| CLIA DELLA INDESTINATION OF THE PROPERTY OF TH | Oshar Data |

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

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | | | |
|-------------------------|--|-----------------------|--|----------------------------------------------------------------------------------------------------------|---|
| TEST WATER SHUT-OFF | | PULL OR ALTER CASING | | WATER SHUT-OFF REPAIRING WELL | - |
| FRACTURE TREAT | | MULTIPLE COMPLETE | | FRACTURE TREATMENT ALTERING CASING | |
| SHOOT OR ACIDIZE | | . ABANDON* | | SHOOTING OR ACIDIZING ABANDONMENT* | |
| REPAIR WELL | | CHANGE PLANS | | (Other) Production Casing | Х |
| (Other) | | | | (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.)*

8-15-77 Ran 120 jts (5369') 7"-20&23#, K-55, ST&C casing set at 5369'. Cemented first stage w/330 sx BJ Lite, 10# Gilsonite/sx followed w/100 sx Class "B", 10% salt. Plug down at 2:00 a.m. Set Lynes external casing packer at 2798'. Opened DV tool at 2706' and circulated cement. Cemented second stage w/370 sx BJ Lite, 10# Gilsonite/sx followed w/50 sx Class "B", 10% salt. Plug down at 6:45 a.m. Circulated cement.

CONFIDENTIAL

OIL CON. COM

| | Area Manager |
|-------------------------------------------------------------|--------------------------------------------|
| 18. I hereby certify that the foregoing is true and correct | Area Manager |
| SIGNED M.C. Landry By DUNG. | TITLE Minerals Management Inc DATE 8-15-77 |
| (This space for Federal or State office use) | |
| APPROVED BYCONDITIONS OF APPROVAL, IF ANY: | TITLE DATE |