UNITED STATES

SUBMIT IN TRIPLICATE.

| DEPARTMENT OF THE INTERIOR verse side) GEOLOGICAL SURVEY | 5. LEASE DESIGNATION AND SERIAL NO. #NOO-C-14-20-5606 | |
|--|--|--|
| 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.) | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo | |
| OIL GAS WELL OTHER Plugged and abandoned 2. NAME OF OPERATOR | 7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME | |
| Palmer Oil & Gas Company 3. ADDRESS OF OPERATOR | Navajo (Allotment #011437) 9. WELL NO. | |
| P. O. Box 2564, Billings, Montana 59103 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface NE4SW4, 1980' FSL & 1980' FWL | 23-11 10. FIELD AND FOOL, OR WILDCAT Bisti Lower Gallup 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA | |
| 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6702 GL, 6715 KB | Sec. 23-24N-9W 12. COUNTY OR PARISE 13. STATE San Juan New Mexico | |
| Check Appropriate Box To Indicate Nature of Notice, Report, or | | |
| FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent date proposed work. If well is directionally drilled, give subsurface locations and measured and true vertinent to this work. | REPAIRING WELL ALTERING CASING ABANDONMENT* Its of multiple completion on Well pletion Report and Log form.) s, including estimated date of starting any | |
| Well was plugged and abandoned 7/17/77 as follows per USG Plug No. 1 - 4950-5250 - 75 sx Plug No. 2 - 4050-4250 - 75 sx Plug No. 3 - 2250-2450 - 75 sx Plug No. 4 - 1450-1650 - 75 sx Plug No. 5 - 1000-1200 - 75 sx | S instructions. | |
| Rig released at 9:30 PM. | JAN 4 1978 JAN COM. OIL CON. 3 OIL DIST. 3 | |
| | SEP 2 3 1977 | |

U. S. GEOLOGICAL SURVINA

| 1.8. I hereby certify the foregoing is true and correct | | | |
|--|---------|---------------------|--------------|
| SIGNED Man & Srown | TITLE _ | Assistant Secretary | DATE 9/19/77 |
| (This space for Federal or State office use) | | | |
| APPROVED BY CONDITIONS OF APPROVAL, IF ANY: (Orig. Sgd.)M. L. SEELINGER | TITLE | | DATE |

*See Instructions on Reverse Side