

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

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. 14-20-603-2085	
2. NAME OF OPERATOR Dome Petroleum Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo	
3. ADDRESS OF OPERATOR Minerals Management Inc., Suite 105, 501 Airport Drive, Farmington, New Mexico 87401		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  790' FSL, 1850' FEL, SEC. 10, T26N, R14W		8. FARM OR LEASE NAME Old Trading Post	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6125' GL, 6137' KB		10. FIELD AND POOL, OR WILDCAT Bisti-Lower Gallup	
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA SEC. 10, T26N, R14W NMPM	
		12. COUNTY OR PARISH San Juan	
		13. STATE N.M.	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Production Casing</u> <input checked="" type="checkbox"/>	

(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.)\*

8-31-77 Drilled to Total Depth of 5986'. Logged and tested the non-productive Dakota interval from 5886' to TD. Plugged back to 5565' w/150 sx neat cement as approved by telephone 8-30-77.

9-1-77 Ran 116 jts (5140')-4 1/2", 10.5#, K-55, ST&C casing set at 5156' KB; stage collar set at 4307'. Cemented first stage w/225 sx 50/50 Pozmix, 2% gel and 12% salt. Plug down at 1:00 p.m. Circulated through stage collar. Cemented second stage w/980 sx 65/35 Halliburton Lite, 10# Gilsonite/sx followed w/50 sx Class "B" neat. Plug down at 6:15 p.m. Circulated cement.

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U.S. GEOLOGICAL SURVEY

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

SIGNED

Area Manager

TITLE Minerals Management Inc. DATE 9-2-77

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side