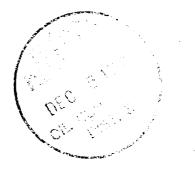
Sept. 10, 1974 F 30-045-21551 F. Loc. 1525/S; 1160/E ______ Elev. <u>5223 GL</u> Spd. _____ Comp. _____ TD ___ Casing S.__ ___ Sx. Int.______@__ __ Sx. Pr.___ Prod. Stim. Csg. Perf. BO/D MCF/D After_ SICP_ PSI After_____ Days GOR __ __ Grav. __ _ 1st Del. -Hrs. NITD Well Log TEST DATA TOPS X C-103 Schd. Ref. No. Kirtland Plat C-104 Electric Log Fruitland C-122 Pictured Cliffs Dfa Cliff House Ditr Dac Datr Menefee

Character Circ 27 + 25 1 p Or 11 com FPhilo C

16C

Point Lookout
Mancos
Gallup
Sanostee
Greenhorn
Dakota
Morrison
Entrada

		SUBMIT IN TRIPLICATE* (Other instructions on reverse side)	Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.		
	GEOLOGICAL SURVEY	, , , , , , , , , , , , , , , , , , , ,	SF 078566-A		
(Do not t	SUNDRY NOTICES AND REPORTS ON use this form for proposals to drill or to deepen or plug back Use "APPLICATION FOR PERMIT—" for such proposals to drill or to deepen or plug back use "APPLICATION FOR PERMIT—" for such prop		6. IF INDIAN, ALLOTTEE		
1.	GAS X OTHER	7. UNIT AGREEMENT NAME			
WELL		S. FARM OR LEASE NAME			
	Natural Gas Company	Howell 9. WELL NO.			
	Farmington, New Mexico 87401	13			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*			10. FIELD AND POOL, OR WILDCAT		
See also space At surface	17 below.)	Undes. Chacra			
	15051G 11/01B	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA			
	1525'S, 1160'E	Sec. 27, T-28-N, R-8-			
14. PERMIT NO. 15. ELEVATIONS (Show whether DF. RT. GR. etc.)			N. M. PM 12. COUNTY OR PARISH 13. STATE		
	622	8' GL	San Juan	New Mexico	
16.	Check Appropriate Box To Indicate Nat	ure of Notice, Report, or O	ther Data		
	NOTICE OF INTENTION TO:	ENT REPORT OF:			
TEST WATER	SHUT-OFF PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING W	ELL	
FRACTURE TR	EAT MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CA	SING	
SHOOT OR AC	IDIZE ABANDON*	ABANDONMEN	T*		
REPAIR WELL	CHANGE PLANS	(Other) (Note: Report results of multiple completion on Well			
(Other) 17. DESCRIBE PROI	POSED OR COMPLETED OPERATIONS (Clearly state all pertinent dork. If well is directionally drilled, give subsurface location	etion Report and Log form including estimated date	m.)		
nent to this	work.) •		depend for all markets	and somes perti-	
Please reso	cind the Applicaton for Permit to Drill th	nis location.			
			A CONTRACTOR OF THE PARTY OF TH	÷.	



			The Same would be a selected and the sel		
18. I hereby certify that the foregoing is true and correct SIGNED	TITLE	Drilling Clerk	 DATE _	_11-30-78	
(This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE		 DATE _		
oh Frank	e Instructio	ons on Reverse Side		ing it	