UNITED STATES

| Indian Allotted | |
|--------------------|---------------|
| & FINDIAN, ALLOTTE | OR TRIBE NAME |

| DEPARTMENT OF THE INTERIOR | Indian Allotted #14-20-603-5036 | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|--|
| GEOLOGICAL SURVEY | & IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo | |
| SUNDRY NOTICES AND REPORTS ON WELLS | 7. UNIT AGREEMENT NAME | |
| Do not use this form for proposals to drift or to despon or plug back to a differ spannelr. Use Form 9–331–C for such proposals.) | & FARM OR LEASE NAME | |
| 1. en Depleted | B. WELL NO. | |
| NAME OF OPERATOR Texas Eastern Developments, Inc. | 44 Shiprock /71 10. FIELD OR WILDCAT NAME | |
| a. ADDRESS OF OPERATOR P.O. Box 2521 Houston, Texas 77001 | Shiprock-Gallup | |
| 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec., 17, T29 N, R 18 W. | |
| below.) AT SURFACE: 2300 FSL 1063 FGL | 12. COUNTY OR PARISH 13. STATE | |
| AT TOP PROD. INTERVAL | San Juan New Mexico | |
| AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF MOTH | 14. API NO. | |
| REPORT, OR OTHER DATA | 18. ELEVATIONS (SHOW DF, KDB. AND WD) 5/93-49 | |
| REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: | | |
| TEST WATER SHUT-OFF U FRACTURE TREAT TRACTURE TREAT TRACTURE TREAT | RECEIVED | |
| SHOOT OR ACIDIZE D RELUE REPAIR WELL D | EIVED REDET results of multiple completion or some | |
| PULL OR ALTER CASING DISTRIBUTION DISTRIBUTION DISTRIBUTION DI JAN 1 | 6 1987 Shange on Form 9-339AN 2 6 198/ | |
| CHANGE ZONES | BUREAU OF LAND MANAGEMEN | |
| | ID MANAGEMENT FARMINGTON RESOURCE AREA RESOURCE AREA | |
| 27. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly including estimated date of starting any proposed work. If well measured and true vertical depths for all markers and zones per Well numerations in accordance with survey of December 1980 (was Shiprock 17 IZ WELL DATE Spud 3/24/61 TD 110 Hole Size 63/4 (METHOD OF PLUGGING REMOVE TUBING, RODS, \$\forall \text{Pump.} | by San Juan Engineering Company, Inc.). Csg 5/2 @ 85 cmt'd w/ 5 sx. | |
| Squeeze Gallup Sand (84 - 110) w/ 12 s: | " | |
| Squeeze Gallup Sand (84 - 776) w/ 72 si surface, set marker. | x neat cmt, fill 5/2 Csg w/cmt to | |
| Subsurface Safety Valve: Manu. and Type | See | |
| 28. I hereby fightly shot the foreeging is true and correct H. N. Linds | APPROVED | |
| M. N. Hinds | | |
| (This space for Public of the | JAN 27 1987 | |
| CONDITIONS OF APPROVAL IF ANY. OIL CO | 041987 FOU AREA MANAGER | |
| on a Dies | PARMINGTON RESOURCE AMEN | |
| ρ· u. DIPs | | |