

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(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.<br><b>14-20-603-5036</b> |  |
| 2. NAME OF OPERATOR<br><b>SHIPROCK CORPO ATION</b>                                                                                                                                   |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME<br><b>None</b>          |  |
| 3. ADDRESS OF OPERATOR<br><b>BOX 14274 OKLAHOMA CITY OKLA</b>                                                                                                                        |  | 7. UNIT AGREEMENT NAME                                       |  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br><b>660' FEL 1650' FSL Sec 17 (Unit 1)</b> |  | 8. FARM OR LEASE NAME<br><b>Shiprock</b>                     |  |
| 14. PERMIT NO.                                                                                                                                                                       |  | 9. WELL NO.<br><b>17-1-9</b>                                 |  |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br><b>5196 GL</b>                                                                                                                     |  | 10. FIRED AND POOL, OR WILDCAT                               |  |
|                                                                                                                                                                                      |  | 11. SURVEY OR AREA<br><b>Shiprock Gallup</b>                 |  |
|                                                                                                                                                                                      |  | 12. COUNTY OR PARISH<br><b>17 29N R18W</b>                   |  |
|                                                                                                                                                                                      |  | 13. STATE                                                    |  |

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

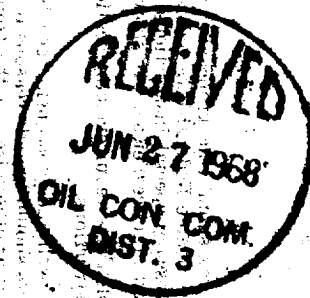
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Displaced 6 sack cement at TD 114 giving approx 20 ft of cement build up in open 4 3/4 hole and into 5 1/2" casing above. Then loaded hole with Fluid and placed marker at surface with one sack of cement.

RECEIVED

JUN 20 1968

U. S. GEOLOGICAL SURVEY



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

SIGNED

*H. E. Sullivan*

TITLE

*For CFS Stringer*  
**Prod Supt**

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

## Instructions

**General:** This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either written or oral, may be obtained from the local Federal and/or State office.

**Item 4:** If there are no applicable State requirements for operations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 17:** Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.