Form 9-331 (May 1963)

16.

## UNITED STATES DEPARTMENT OF THE INTERIOR (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

I-89-IND 56

## GEOLOGICAL SURVEY SUNDRY NOTICES AND REPORTS ON WELLS

6 IF INDIAN, ALLOTTEE OR TRIBE NAME

olog but use this form Use	Navajo Tribe			
OIL GAS WELL WELL	OTHER	7. UNIT AGREEMENT NAME		
2. NAME OF OPERATOR Eastern Petrol	eum Company	8. FARM OR LEASE NAME Navajo		
3. ADDRESS OF OPERATOR P. O. Box 226,	Farmington, New Mexico 87401	9. WELL NO. #151		
<ol> <li>FOCATION OF WELL (Report See also space 17 below.) At surface</li> </ol>	location clearly and in accordance with any State requirements.*	10. FIELD AND POOL, OR WILDCAT Rattlesnake-Dakota		
1700 FSL - 900 FWL		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA		
		Sec.12, T29N, R19W		
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE		
	5304 GL	San Juan New Mexico		

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

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:					
TEST WATER SHUT-OFF	[]	PULL OR ALTER CASING		WATER	SHUT-OFF		REPAIRING WELL	
PRACTURE TREAT		MULTIPLE COMPLETE		FRACTUE	RE TREATMENT		ALTERING CASING	
SHOOT OR ACIDIZE		ABANDON*	X	SHOOTI	NG OR ACIDIZING		ABANDONMENT*	
REPAIR WELL		CHANGE PLANS		(Other)			· · · · · · · · · · · · · · · · · · ·	
(Other)			l	(N	lote: Report res Impletion or Rec	sults of multiple ompletion Report	completion on Welt and Log form.)	11

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.) \*

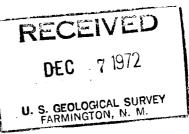
Well to be plugged and abandoned - Will set the following plugs:

747-647 Dakota "A" Bench w/14sxTop Plug w/6sx

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Will errect a 4'4" marker and clean up location.





$\wedge$				
18. I hereby certify that the fo	oregoing is true and correct	TILE Vice	President	DATE 11-30-72
(This space for Federal or	State office use)			
APPROVED BY	TAL, IF ANY:	TITLE		DATE