

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

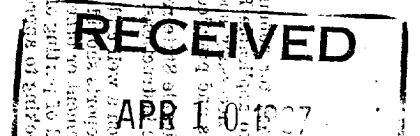
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)		5. LEASE DESIGNATION AND SERIAL NO. 14-20-0603-9591	
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Tribal	
		7. UNIT AGREEMENT NAME	
		8. FARM OR LEASE NAME North Hogback	
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		9. WELL NO. 10	
2. NAME OF OPERATOR Walter Duncan		10. FIELD AND POOL, OR WILDCAT Wildcat	
3. ADDRESS OF OPERATOR Box 137, Durango, Colorado		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 1-29N-17W	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 990' N/S, 1650' W/E, 1-29N-17W		12. COUNTY OR PARISH San Juan	
14. PERMIT NO.		13. STATE N. Mex.	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4979' ground level			

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) <input type="checkbox"/>	
(Other) Suspend operations	<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.)*

Received approved application for permit to drill this test under date of March 6, 1967. Due to other commitments, this test will not be drilled at the present time. Will re-apply for approval before drilling.



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

SIGNED *Walter Duncan* X for: **Walter Duncan** DATE **April 5, 1967**

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: