

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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FORM APPROVED
Budget Bureau No. 1004-0135
Expires: September 30, 1990

91 JUL -3 PM 1:20

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

1149IND7850

Indian, Allottee or Tribe Name

Navajo

7. If Unit or CA, Agreement Designation

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

GRAND RESOURCES, INC.

3. Address and Telephone No.

2250 E. 73rd St., Ste. 400 Tulsa, OK 74136 (918) 492-2366

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

610 FNL - 1980 FWL
Sec. 25-32N-18W

8. Well Name and No.

Navajo "Aztec" #5

9. API Well No.

300451130500S1

10. Field and Pool, or Exploratory Area

Gallup

11. County or Parish, State

San Juan County, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☒ Conversion to Injection

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

13. 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.)*

Convert #5"A", a producing well to an injection well.

MIRU. Pull 2 1/16" 8 Rd EUE J-55 tbgr. Run same tubing in hole with Halliburton R-4 packer. Set packer at approximately 1625'. Pressure test casing to approximately 1000 psi. Commence injection.

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OP. CON. DIV
DIST. 3

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

Signed: *[Signature]* Title: Operations Manager

Date: 06/27/91

This space for Federal or State office use

Approved by: *[Signature]* Title: *[Signature]*

Positions of approval, if any:

NOV 8 1991

Date: *[Signature]*

AREA IN CHARGE

Title: Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side