

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

ISSUED IN TRIPLICATE
(Other instructions on reverse side)

Form approved
Bureau of Mines No. 42-11104

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 ☐ GAS WELL ☐ OTHER Water Injection		5. LEASE DESIGNATION AND SERIAL NO. 14-08-0001-8200
2. NAME OF OPERATOR Atlantic Richfield Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo-Ute Men.
3. ADDRESS OF OPERATOR Box 2197 Farmington, N. M.		7. UNIT AGREEMENT NAME Horseshoe Gallup Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1986' FNL & 1922' FWL (Unit F) Sec 2		8. FARM OR LEASE NAME Horseshoe Gallup
14. PERMIT NO.		9. WELL NO. 240
15. ELEVATIONS (Show whether DF, HT, CH, etc.) GR 5641'		10. FIELD AND POOL, OR WILDCAT Horseshoe Gallup-Gallup
		11. SEC., T., R., N., S., E., AND SULVEY OR ALLEA Sec 2, T-30N R-16W
		12. COUNTY OR PARISH San Juan
		13. STATE N. M.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☐
FRACTURE TREAT	☐	FRACTURE TREATMENT	☐
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other)	☐
(Other)	Shut in		
PULL OR ALTER CASING	☐	REPAIRING WELL	☐
MULTIPLE COMPLETE	☐	ALTERING CASING	☐
ABANDON*	☐	ABANDONMENT*	☐
CHANGE PLANS	☒		

(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).*

We propose to cease injection in this well as uneconomical to operate. The production supported by this well is not sufficient to justify continued injection. Part of the water normally injected in this well will be transferred to a well nearer the center of the field. Perforations open are 1574'-1612' & 1616'-1626'. If any adverse effect on oil production is noted we will probably want to resume injection in this well.

JUN 25 1970



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

SIGNED B. S. [Signature] TITLE Dir. - Prod. Supv DATE 6/13/70

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: