Form 9-331 (May 1963)	DEPART	UNITED STATES SUBMIT IN TRIPLICATE* DEPARTMENT OF THE INTERIOR (Other instructions on reverse side)				Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.		
		GEOLOGICAL SURVEY				14-20-603-20	14-20-603-2022	
		ICES AND RE sals to drill or to deep			one	6. IF INDIAN, ALLOTTEI Navajo	OR TRIBE NAME	
1. OIL GAS			<i></i>	1	1	7. UNIT AGREEMENT NA	<u>-</u>	
WE'LL WE			40.			Horseshoe Ga	llup Unit	
2. NAME OF OPERATO	R				. /	8. FARM OR LEASE NAM	E	
Atlantic	Richfield C	ompany	ي ا	المناو	10 /	Horseshoe Ga	11up	
3. ADDRESS OF OPER	ATOR		7,		/	9. WELL NO.		
		Suite 501, D			•	70		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)						10. FIELD AND POOL, OF	WILDCAT	
At surface						Horseshoe Ga	llup - Gallur	
				•		11. SEC., T., R., M., OR B		
Unit B, 6	60' FNL and	1980' FEL, S	ec. 14-311	N-1.7W		SURVEY OR AREA		
		ř				Sec. 14-31N-	17w	
14. PERMIT NO.		15. ELEVATIONS (Sho	w whether DF, RT	c, GR, etc.)		12. COUNTY OR PARISH		
		5356' G	R			San Juan	New Mexico	
							11011 11011100	
16.	Check A	ppropriate Box To	Indicate Nat	ure of Notice, Rep	oort, or C	Other Data		
	NOTICE OF INTENTION TO:						UENT REPORT OF:	
TEST WATER SH		PULL OR ALTER CASING	<u></u>		[٦		
				WATER SHUT-OFF		REPAIRING V		
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATM		ALTERING CA		
SHOOT OR ACIDIZ		ABANDON*		SHOOTING OR ACT	t-in	ABANDONMEN	T*	
REPAIR WELL		CHANGE PLANS		(Other) (Note: Rep	ort results	of multiple completion	on Well	
(Other)		400				of multiple completion etion Report and Log for		
nent to this wor	rk.) •					including estimated dated dated depths for all markers		
		in during Marc ate (approxima			w produ	oction making i	t	
plans are may resul that may	to conduct t in a revis	sed waterflood use of this w	nd tertiar I plan or	y recovery s in a tertiar	tudies. y recov	These studie	S	
					•			
Two (2) copies se	nt to New Mex	ico Oil Co	onservation C	ommissi	on		
18. I hereby certify	that the foregoing i	s true and correct						
signed W. K.	walther,	Jr.	ritle Dist	. Prod. & Dr	lg. Sup	t. DATE 10-	18-74	
(This space for l	Federal or State offi	ce use)						
APPROVED BY CONDITIONS OF	APPROVAL, IF A		TITLE			DATE		