

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Budget Bureau No. 1-001-1-15
Expires August 31, 1985

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. 14-20-604-1981
2. NAME OF OPERATOR ARCO Oil & Gas Company, Division of Atlantic Richfield Co.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Ute Mountain
3. ADDRESS OF OPERATOR 1816 E. Mojave, Farmington, New Mexico 87401	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 660' FSL 2055' FEL	8. FARM OR LEASE NAME Horseshoe Gallup
14. PERMIT NO.	9. WELL NO. 172
15. ELEVATIONS (Show whether DF, ST, GR, etc.) 5450' GL	10. FIELD AND POOL, OR WILDCAT Horseshoe Gallup
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 27, T-31N, R-16W
	12. COUNTY OR PARISH San Juan
	13. STATE NM

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 PLANT <input checked="" type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input 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.)*

ARCO Oil and Gas Company respectfully requests approval to activate the subject well on the Horseshoe Gallup Unit "D" Lease. The well was shut-in in 1984 and currently has approved long term shut-in status. The produced fluid from this well will be stored in Test Station #15 Tank located SESW, Sec. 27, T-31N, R-16W. The produced fluid will be transported to the Horseshoe Gallup Unit "B" Lease with a hot oiler as storage is needed at Test Station #15. The produced fluid will be treated and sold at the Horseshoe Gallup Unit "B" Battery. The tank at Test Station #15 will be locked and sealed. Also, the well will be tested twice annually. The subject well will be activated when ARCO receives an approved Sundry.

RECEIVED
Bureau of Land Management

MAY 10 1988

Durango, Colorado

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

SIGNED *[Signature]*
(This space for Federal or State office use)

TITLE Production Supervisor

DATE 5/5/88

APPROVED BY L. Mark Hollis
CONDITIONS OF APPROVAL, IF ANY:

TITLE ACTING AREA MANAGER

DATE MAY 24 1988

*See Instructions on Reverse Side