

Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
34-03-0001-S280

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo-UTO Min.

7. UNIT AGREEMENT NAME

Horsehoe Colling Unit

8. FARM OR LEASE NAME

Horsehoe Colling Unit

9. WELL NO.

147

10. FIELD AND POOL, OR WILDCAT

Horsehoe Colling

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec 28, T. 31 N., R. 16 W.

12. COUNTY OR PARISH

SAN JUAN Co. N.M.

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 ☐

2. NAME OF OPERATOR

Atlantic Richfield Company

3. ADDRESS OF OPERATOR

P.O. Box 2197, Farmington, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

635' FNL + 3245' FEL (Unit C) Sec. 28

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

625750' RT 6750'

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) Shut in Well

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

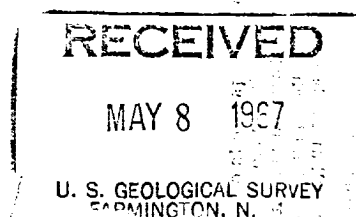
ABANDONMENT* ☐

(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 continuous operation of this well as presently uneconomical to operate. Well is producing / BOPD and 2 MOPD.

We do expect to periodically test the well to detect any significant change in its producing capability. If this change occurs, the well will be returned to producing status.



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

SIGNED B. J. Sartin

TITLE Eng. Prod. Supv.

DATE 5-2-67

(This space for Federal or State office use)

APPROVED BY _____

CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side