

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved.
Budget Bureau No. 1004-0135
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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR
ARCO Oil & Gas Company

3. ADDRESS OF OPERATOR
1816 E. Mojave, Farmington, N. Mex. 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
925' FSL & 2260' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether NG, RT, or etc.)
7227' GL

RECEIVED
NOV 26 1986
BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

5. LEASE DESIGNATION AND SERIAL NO.
Fed.Min.: NM-04075

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Hill

9. WELL NO.
23-2

10. FIELD AND POOL, OR WILDCAT
W.Lindrith Gallup/Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 23, T-25N, R-3W

12. COUNTY OR PARISH
Rio Arriba

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	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
(Other) Gas Vent Request	<input checked="" type="checkbox"/>		
PULL OR ALTER CASING	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>		

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.)*

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

ARCO Oil and Gas Company requests approval to continue venting gas from the ARCO Hill #23-2 for a period of 30 days. Since the well was first swab tested 11/2/86, our APD approval to vent gas will expire 12/2/86. ARCO requests approval to continue venting gas for an additional 30 days since a GOR test run 11/21/86 was 2 BOPD, 3 BWPD and gas volume too small to measure. An additional 30 day extension will allow ARCO to receive our pipeline construction permit and continue our evaluation and remedial work on this well.

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

SIGNED

W. James Hill

TITLE Area Prod. Supervisor

DATE

11-25-86

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

DATE

John Skella
for

*See Instructions on Reverse Side

NM000