

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM 04075
2. NAME OF OPERATOR ARCO Oil and Gas Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 1816 E. Mojave, Farmington, New Mexico 79702	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface	8. FARM OR LEASE NAME Gardner
	9. WELL NO. 13-1
	10. FIELD AND POOL, OR WILDCAT Gavilan Gallup/Dakota
	11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA 13-25N-3W
14. PERMIT NO. 30-039-24072	12. COUNTY OR PARISH Rio Arriba
15. ELEVATIONS (Show whether on, at, or, etc.) 7223 GR	13. STATE NM

RECEIVED

DEC 18 1986

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Gas Venting	X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other)	

(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 requests approval to vent gas from the Gardner #13-1 for an additional 30 days beyond the 30 days granted in the APD. The Gardner #13-1 was swab tested November 22 with permanent facilities, being completed 12/05/86. Oil was first run into permanent tanks 12/06/86.

ARCO Oil and Gas Company requests this 30 day gas venting extension since the present rate of 15 BOPD, 3 BWPD and 41 MCFPD tested 12/13/86 makes it uneconomic to construct the required 9800' of gas flowline. If this request is approved, ARCO will evaluate this well during the next 30 days in order to improve production by restimulation or recompletion.

approved under NE L-49 Sect. III.c.

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

SIGNED W James Shee

TITLE Area Production Supt.

DATE 12-18-86

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

DEC 19 1986

James Shee
AREA MANAGER

*See Instructions on Reverse Side