

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"/>		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR ARCO Oil & Gas Co., Division of Atlantic Richfield Co.		8. FARM OR LEASE NAME Tonkin Federal
3. ADDRESS OF OPERATOR 1816 E. Mojave, Farmington, New Mexico 87401		9. WELL NO. 5
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1955' FSL 510' FEL		10. FIELD AND POOL, OR WILDCAT W.Lindrith Gallup/Dakota
14. PERMIT NO. API 30-039-24095		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 18, T-24N, R-3W
15. ELEVATIONS (Show whether DP, RT, GR, etc.) 6940' GR		12. COUNTY OR PARISH Rio Arriba
		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 PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) Vent Gas Request <input checked="" 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 requests permission to vent gas from the Tonkin #5 for a period up to 60 days. A GOR Test was performed on 2/24-25/87 with the following results: 9 BOPD, 0 BWPD, and 59 MCFPD. This well is presently shut-in since our gas venting authority expired and bad weather has prevented ARCO from starting pipeline construction. Pipeline construction will begin as soon as possible with ARCO restricting production to 139 BO/month to limit the amount of gas vented to no more than 912 MCF/month (30 MCFPD).

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

SIGNED Leis Felt

TITLE Production Supervisor

DATE 2/26/87

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

*See Instructions on Reverse Side

