

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

## 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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other
2. NAME OF OPERATOR ARCO Oil and Gas Company  
Division of Atlantic Richfield Company
3. ADDRESS OF OPERATOR  
P. O. Box 5540, Denver, Colorado 80217
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 835' FNL & 1810' FWL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH: Approx the same
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

## REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
- FRACTURE TREAT ☐
- SHOOT OR ACIDIZE ☐
- REPAIR WELL ☐
- PULL OR ALTER CASING ☐
- MULTIPLE COMPLETE ☐
- CHANGE ZONES ☐
- ABANDON\* ☐

## SUBSEQUENT REPORT OF:

- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐

(other) Location change and revision of original application

RECEIVED

MAR 3 1980

U. S. GEOLOGICAL SURVEY  
FARMINGTON, N. M.

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

This location was moved 885' north and 110' east. This change does not alter the original Drilling Plan. This new location lies on the crown of a ridge with a wash on each side. The ridge will have to be cut down and pushed each way. The location will lay northeast and southwest with rig laydown and V door to the southwest and pit on the northeast side. There will be a 15' cut on the southwest and a 10' fill on the northeast side. Corrected plan, map and rig layout are attached.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_

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

SIGNED W. A. Walther, Jr. TITLE Operations Manager DATE 2-26-80

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: