

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

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 Injection Well

2. NAME OF OPERATOR
ARCO Oil and Gas Company, Div. of Atlantic Richfield Co.

3. ADDRESS OF OPERATOR
1816 E. Mojave, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
2310'FSL, 4390'FEL

14. PERMIT NO. _____ 15. ELEVATIONS (Show whether DF, ST, GR, etc.)
5306' GL

5. LEASE DESIGNATION AND SERIAL NO.
SF-079439

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
NAVAJO

7. UNIT AGREEMENT NAME
HORSESHOE GALLUP UNIT

8. FARM OR LEASE NAME
HORSESHOE GALLUP

9. WELL NO.
242

10. FIELD AND POOL, OR WILDCAT
HORSESHOE GALLUP

11. SEC., T., R., N., OR S.E.K. AND SURVEY OR AREA
SEC 4, T-30N, R-16W

12. COUNTY OR PARISH 13. STATE
SAN JUAN NM

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 COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>
(Other) <input type="checkbox"/>	

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) <input 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 respectfully requests approval for extension of long term shut-in status on this well. Over the past two years, ARCO has reactivated several previously uneconomic long term shut-in wells and found commercial production. In addition, an ongoing CO2 feasibility study is underway which may yield significant additional oil recovery. Implementation of a CO2 flood would require the workover of existing wells, and the drilling of new wells. For these reasons, ARCO proposes that this well be maintained in the long term shut-in status so that the wellbore will be available, should future production tests indicate commercial production or should it be needed as part of a future CO2 flood. This plan eliminates the economic waste of potentially usable wellbores and promotes conservation.

RECEIVED

JAN 02 1990

OIL CON. DIV.

DIST. 6

THIS APPROVAL EXPIRES SEP 01 1990

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

SIGNED [Signature] TITLE Sr. Prod Supr

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY: _____

APPROVED
DATE 08/30/89

REC-01 1989

AREA MANAGER
FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side