

Form approved.
Budget Bureau No. 42-R1424.

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 Horseshoe Gallup Unit	
2. NAME OF OPERATOR Atlantic Richfield Company		8. FARM OR LEASE NAME Horseshoe Gallup Unit	
3. ADDRESS OF OPERATOR 501 Lincoln Tower Bldg., 1860 Lincoln St., Denver, Colo. 80203		9. WELL NO. 294	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit "J" (NW SE) ~ 1378' f/South & 1330' f/East lines Sec. 30 API #30-045-22099		10. FIELD AND POOL, OR WILDCAT Horseshoe Gallup	
14. PERMIT NO. Mr. McGrath, 6/7/76		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 30-31N-16W	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5477' GL; 5488' KB		12. COUNTY OR PARISH San Juan	13. STATE New Mexico

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"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
FRACTURE TREAT		MULTIPLE COMPLETE	
SHOOT OR ACIDIZE		ABANDON*	
REPAIR WELL		CHANGE PLANS	
(Other)			

WATER SHUT-OFF	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
FRACTURE TREATMENT		ALTERING CASING	
SHOOTING OR ACIDIZING		ABANDONMENT*	
(Other) <u>Spud & set surf. csg.</u>			X

(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.) *

Spudded 12-1/4" hole 12 noon 7/29/76. Drld 12-1/4" hole to 142'. Ran 3 jts, 125.48', 8-5/8" OD 21# K-55 ST&C 8rd N casing, set at 139'KB, cemented w/ 120 sx Class "B" w/ 2% CaCl, gd cement returns, plug down 6 p.m. 7/29/76. WOC.

Nippled up, installed BOP. Tested casing & BOP @ 750# f/ 30 min., held O.K.. Started drlg out @ 12 noon 7/30/76.

7-31/76 - Drilling ahead @ 1052', 7-7/8" hole.



RECEIVED

AUG 4 1976

U. S. GEOLOGICAL SURVEY
WASHINGTON, D. C.

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

SIGNED

Operations Manager

TITLE Operations Manager

DATE 8/2/76

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

***See Instructions on Reverse Side**