Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

FORM APPROVED Budget Bureau No. 1004-0135

Expires: March 31, 1993 5. Lease Designation and Serial No.

6. If Indian, Allottee or Tribe Name

SF-078863

SUNDRY	NOTICES	AND	REPORTS	ON	WELLS
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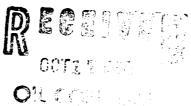
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals

7. If Unit or CA, Agreement Designation

SUBMI	T IN TRIPLICATE	7. If Unit of CA, Agreement Designation
1. Type of Well		
Oil Gas Well Other	8. Well Name and No.	
2. Name of Operator		Krause WN Fed. 8E
ARCO Oil and Gas Company		9. API Well No.
3. Address and Telephone No.		30-045-24123
1816 E. Mojave, Farmington, NM	87401 (505) 325-7527	10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey D	Basin Dakota	
		11. County or Parish, State
Unit F 1595' FNL & 2170' FWL	Sec. 29, T-28N, R-11W	San Juan, New Mexico
12. CHECK APPROPRIATE BOX	s) TO INDICATE NATURE OF NOTICE, REPOR	T, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Abandonment	Change of Plans
	Recompletion	New Construction
Subsequent Report	Plugging Back	Non-Routine Fracturing
	Casing Repair	Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection
	Other Extension of Long Term	Dispose Water
	Shut In	(Note: Report results of multiple completion on Weil

13. 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. At this time, under the current limited gas market, ARCO cannot economically operate the subject well.



THIS APPROVAL EXPIRES SEP 3 0 1391

(Note: Report results of multiple completion on Weil-Completion or Recompletion Report and Log form.)

Title _	Production Supervisor	9/19/90
		SPPRINT
Title _		Date
		OCT 04 1990
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crime for any person knowingly and willfully to make to any department or agency of the United States any false. or representations as to any matter within its jurisdiction.