(Do not use this reservoir. Use Fo

New Mexico

9. WELL NO.

261

AREA

14. API NO.

10. FIELD OR WILDCAT NAME

Sec. 9-30N-16W

None Assigned

San Juan

Horseshoe Gallup Unit

12. COUNTY OR PARISH: 13. STATE

11. SEC., T., R., M., OR BLK, AND SURVEY OR

15. ELEVATIONS (SHOW DF, KDB, AND WD) 5299 GR

CHUTED CTATES

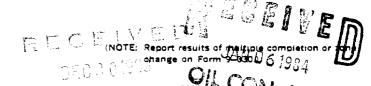
| DEPARTMENT OF THE INTERIOR | 5. LEASE S-F-081226-A | |
|--|--|--|
| GEOLOGICAL SURVEY | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME USA | |
| SUNDRY NOTICES AND REPORTS ON WELLS | 7. UNIT AGREEMENT NAME | |
| not use this form for proposals to drill or to deepen or plug back to a different evoir. Use Form 9-331-C for such proposals.) | Horseshoe Gallup Unit 8. FARM OR LEASE NAME | |
| 011 - 735 - | Horseshoe Gallup Unit | |

1. oil other X - Injection well 2. NAME OF OPERATOR ARCO Oil & Gas Co., Div. of Atlantic Richfield Company 3. ADDRESS OF OPERATOR 707-17th Street, P.O. Box 5540, Denver, CO 80217 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) Unit 560' FNL & 660' FWL, Sec. 9 AT SURFACE: AT TOP PROD. INTERVAL: Appx. same AT TOTAL DEPTH: Appx. 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* (other)

SUBSEQUENT REPORT OF:



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 has plugged and abandoned the subject well in accordance with the Sundry Notice dated December 30, 1982, and approved by the BLM-MMS on January 11, 1983. Injection interval 1066' - 1107', Gallup fm. Spotted cement plugs as per the attached plugging operations report.

Completed P & A, 9-19-83.

Final restoration will be commenced as soon as weather permits. An additional subsequent report will be filed when restoration has been completed.

| Subsurface Safety Valve: Manu. and T | yp e | Set @ Ft. |
|---|---|--------------------------|
| 18. I hereby certify that the foregoing | is true and correct | |
| SIGNED Stephen Rose | TITLE Dist.Prod. Supt. | _ DATE November 30, 1983 |
| <u> </u> | (This space for Federal or State office use | |
| APPROVED BY | TITLE | DATE |