Form 9-331 (May 1963)

UNITED STATES SUBMIT IN TRIPLICATE* Other instructions on reverse side)

Form approved. Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

GEOLOGICAL SURVEY		14-08-0001-6200
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.)		6. IF INDIAN, ALLOTTES OR TRIBE NAME
OIL GAS WELL OTHER		Horseshoe Gallup Unit
2. NAME OF OPERATOR		8. FARM OR LEASE NAME
Atlantic Richfield Company		Hormeshoe Gallup Unit
3. ADDRESS OF OPERATOR P.O. Box 2197 Farmington, New Mexico 4. Location of Well (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 550 FSA 7 550 7006 (1100 ft. 100 ft		9, WELL NO.
		10. FIELD AND POOL, OR WILDCAT HOTS SBOO GALLUD 11. abc., t., E., M., OR BLK. AND SURVEY OR AREA 3. T. TOTAR / OW
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OF PARISH 13. STATE
	GR 6333 RKB 2576	isa Juan N. M.
16. Check Ap	propriate Box To Indicate Nature of Notice, Report, o	r Other Data
NOTICE OF INTENT	ION TO:	EQUENT REPORT OF:

PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL TEST WATER SHUT-OFF ALTERING CASING FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT ABANDON MENT SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZING CHANGE PLANS REPAIR WELL (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) Shut in Well (Other)

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.) *

We propose to cease continuous operation of this well as prepently Well is producing / BOPD and 32 ByPD. uneconomical to operate. We do expect to periodically test the well to detect may algaliteent change in its producing capability. If this change occurs, the will be returned to producing status.

U. S. GEOLOGICAL SURVEY

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18. I hereby certify that the foregoing is true and correct SIGNED	TITLE Drlg. Prod	Jupv. Date ==2-67	
(This space for Federal or State office use) APPROVED BY	TITLE	g has a partition of the control of	
CONDITIONS OF APPROVAL, IF ANY:	11100		