Form 3160-5 (November 1983) (Formerly 9-331)	UNITED STAT DEPARTMENT OF THE BUREAU OF LAND MAN	INTERIOR	SUBMIT IN TRIPLICATE® (Other instructions on reverse side)	Budget Bureau No. 1004-0135 Expires August 31, 1985  5. Leass Designation and Serial No.  SF-081226-4
	RY NOTICES AND REF			6. IF INDIAN, ALLOTTER OR TRIBE NAME  N/A
				7. UNIT AGREEMENT NAME
MELL GAB	ormen Injection Wel	1s		Horseshoe Gallup Unit
2. NAME OF OPERATOR	• • • • • • • • • • • • • • • • • • • •			S. PARM OR LEASE WAME
AKCU U11 and	Gas Company, Divisior	n of Atlant	ic Richfield Co.	Horseshoe Gallup
•	o Coundanton Nov. W.		. 4	9. WBLL BO.
1816 E. Mojave, Farmington, New Mexico 87401  1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface				253 10. FIBLD AND POOL, OR WILDCAT
				· ·
				Horseshoe Gallup 11. sac, T, B, M, OR BLK. AND
				SURVEY OR AREA
660' FSL, 3300' FEL				Sec. 4, T-30N, R-16W
<b>,</b>		Show whether DF, RT, GR, etc.)		12. COUNTY OR PARISH 18. STATE
	5328	3' GL		San Juan N.M.
16.	Check Appropriate Roy To	ladicata Nat	a of Nation Passat on C	
Check Appropriate Box To Indicate Nature of Notice, Report, or C				
NOT	CE OF INTENTION TO:		# # # # # # # # # # # # # # # # # # # #	ENT REPORT OF:
TEST WATER SHITT-OFF	PULL OR ALTER CASING		WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE		PRACTURE TREATMENT	ALTERING CARING
SHOOT OR ACIDIZE	ABANDON®		BEOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL (Other)	CHANGE PLANS	X	(Other)	of multiple completion on Well
	VIPLETED OPERATIONS (Clanche state	all partinent date	Completion or Recomple	etion Report and Log form.) Including estimated date of starting any
cannot economethe feasibilimay yield signould require For this reasonate shut-in statupart of a fut.	s well. At this tillically operate the ty of CO <sub>2</sub> flooding f gnificant additional the workover of eson, ARCO proposes so that the well!	me, under subject water for the Hor oil reconsisting we that this bore will plan elimi	the current waters well. An ongoing seshoe Gallup Fiel very. Implementate ells, and the dri well be maintain	
18. I hereby certify that the	foregoing is true and correct	<del> </del>		
SIGNED SIGNED		TTLE Produ	ction Supervisor	DATE 6/30/87
(This space for Federal	<u> </u>			
APPROVED BY		ITLE		DATE
CONDITIONS OF APPR		nstructions on	Revene Side	a Solo Kellin

\*See Instructions on Reverse Side NIMOCC