

NOTICE AND REPORT ON WELL

1. NAME OF OPERATOR: ARCO Oil & Gas Co., Div. of Atlantic Richfield Company

2. WELL NO.: Horseshoe Gallup Unit # 250

3. ADDRESS OF OPERATOR: 707-17th Street P.O. Box 5540, Denver, CO 80217

4. REPORT LOCATION CLEARLY AND ACCORDANCE WITH ANY STATE REQUIREMENTS:
 CHIT "L"
 At Surface: 1980' FSL & 660' FWL, Sec. 2
 At top Prod. Interval: Appx. same
 At total depth: Appx. same

5. ELEVATIONS (Show whether DF, RT, OR, etc.): 5643' GR

6. COUNTY OR PARISH OR STATE: San Juan NM

16. 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"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <u>Final Restoration of Loc. X</u> <input checked="" type="checkbox"/> | |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROMISED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and notes pertinent to this work.)

Subject well was P&A'd 8/16/83 (per Sundry Notice dated 11/30/83). The location has been restored and is ready for final inspection.

RECEIVED
 MAR 04 1985
 OIL CON. DIV.
 DIST. 3

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

John L. Hall TITLE Dist. Prod. Supt. DATE 5/8/84

19. APPROVED BY: _____ TITLE _____ DATE _____

20. REVISIONS OR APPROVAL, IF ANY: _____

ACCEPTED FOR RECORD

NMOCC
 *See Instructions on Reverse Side

FEB 01 1985

FARMINGTON RESOURCE AREA