UNITED STATES

UNITED STATES	5. XEASE			
DEPARTMENT OF THE INTERIOR	SF-081226-B			
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME			
(Do not use this form for proposals to drill or to deepen or plug back to a different	Horseshoe Gallup Unit			
reservoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME			
1. oil gas g	Horseshoe Gallup Unit			
well well other Injection Well	9. WELL NO.			
2. NAME OF OPERATOR ARCO Oil and Gas Co., Div.	232			
of Atlantic Richfield Company	10. FIELD OR WILDCAT NAME			
3. ADDRESS OF OPERATOR 707-17th Street,	Horseshoe Gallup			
P.O. Box 5540, Denver, Co. 80217	11. SEC., T., R., M., OR BLK. AND SURVEY OR			
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA A MOON PICH			
below.) (Unit F) SE NW,	Sec. 4-T30N-R16W			
AT SURFACE: 2069' FNL & 1710' FWL, Sec.4	12. COUNTY OR PARISH: 13. STATE			
AT TOP PROD. INTERVAL: Appx. same	San Juan New Mexico			
AT TOTAL DEPTH: Appx. same	14. API NO. None			
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,				
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)			
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	5338' GL			
	-0			
FRACTURE TREAT	IVED			
SHOOT OR ACIDIZE				
REPAIR WELL	9 1987: Report lesures of Multiple completion or zone			
PULL OR ALTER CASING	MANAGEMEN			
SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) X -Polymer Injection RE AUG 19 1983: Helpot require of multiple completon or zone AUG 19 1983: Helpot require of multiple completon or zone AUG 30 983 BUREAU OF LAND MANAGE AREA AUG 30 983 OLL CON. DIV.				
ABANDON*	OIL CON. DIV.			
(other) X -Polymer Injection	OIL COLL			
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state	CIST. 3			
including actimated date of starting any proposed work. It well is t	lifectionally diffied, give substitute locations diff			
measured and true vertical depths for all markers and zones pertine	nt to this work.)*			
	7			
ARCO Oil and Gas Company desires to imp				
waterflood in the Horseshoe Gallup Unit				
being waterflooded. This well is one of				
pose to inject polymer to recover addit through normal waterflooding.	cional off not accarnable			
chrough normal water rooding.				
We made application with the State of N	New Mexico(Form C-108.			
("Application for Authorization to Injection				
this well.				
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Subsurface Safety Valve: Manu. and Type			Set @	Ft.
18. I hereby certify that the foregoing is tr	rue and correct			
SIGNED Stephen Rose	TITLE Dist.Prod.	Supt DATE	August 16, 198	<u>iD</u>
S. C. ROSP	(This space for Federal or State of	office use)		
APPROVED BYCONDITIONS OF APPROVAL IF ANY:	TITLE	DATE	Rolest Ma	TRE FOT