Form 9- (May 19	UNITED STATES SUBMIT IN TRIPLICATE* DEPARTMENT OF THE INTERIOR verse side) GEOLOGICAL SURVEY	Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO. S. F. 079439
	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, ALLOTTEE OR TRIBE NAME Navajo-Ute Mountain
1. OIL WEL 2. NAM	GAS OTHER Injection TE OF OPERATOR	7. UNIT AGREEMENT NAME Horseshoe Gallup Unit 8. FARM OR LEASE NAME
3. ADDI	lantic Richfield Company RESS OF OPERATOR 60 Lincoln Street, Suite 501, Denver, Colorado 80203	Horseshoe Gallup 9. WELL NO. 223
4. Loc. See At	arion of Well (Report location clearly and in accordance with any State requirements.* also space 17 below.) it D, 990' f/South & 330' f/West lines, Section 3	Horseshoe Gallup 11. SEC., T., B., M., OR BLK. AND SURVEY OF AREA
14. PER	MIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5790	Sec. 3-30N-16W 12. COUNTY OR PARISH 13. STATE
16.		San Juan New Mexico
	Check Appropriate Box To Indicate Nature of Notice, Report, or O	iner Daid
FRA SH REI (O	PULL OR ALTER CASING ACTURE TREAT OUT OR ACIDIZE PAIR WELL CHANGE PLANS PULL OR ALTER CASING MULTIPLE COMPLETE FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) Shut In, Ex (Note: Report results of	ALTERING WELL ALTERING CASING ABANDONMENT* Ktension Request of multiple completion on Well tion Report and Log form.)
The production supported by this well makes it uneconomical to operate. The well was snut in 8-12-68. This well is in a large Unit which is now under waterflood operations. Future plans are to conduct waterflood and tertiary recovery studies. These studies may result in a revised waterflood plan or in a tertiary recovery program that may require the use of this well in order to recover the maximum amount of oil from this reservoir.		
	TEMPORARY ALAMOURAMENT EXPIRES JUN 1 1977 o copies sent to New Mexico Oil Conservation Commission	PELLIVED JUN 14 1976 OIL CON. COM. DIST. 3
18. I hereby certify that the foregoing is true and correct		
SIG:	NED W. A. Walther, Jr. Operations Manager	DATE 6/4/76

(This space for Federal or State office use)

APPROVED BY ______CONDITIONS OF APPROVAL, IF ANY: