Form 9-331 (May 1963)	UNITED STATES SUBMIT IN TRIPLICATE DEPARTMENT OF THE INTERIOR verse side) GEOLOGICAL SURVEY	
(Do not us	SUNDRY NOTICES AND REPORTS ON WELLS  e 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
1.		7. UNIT AGREEMENT NAME
WE'L W	AS OTHER	8. FARM OR LEASE NAME
2. NAME OF OPERA	outhland Royalty Company	Tapacitos
3. ADDRESS OF OPE		9. WELL NO.
	0. Box 570 , Farmington, NM 87401	#2
	ELL (Report location clearly and in accordance with any State requirements.*	10. FIELD AND POOL, OR WILDCAT
See also space ! At surface	17 below.)	Wildcat
	645' FSL & 790' FWL	11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA
		Section 25, T26N, R2W
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	7723' GR	Rio Arriba   New Mexico
16.	Check Appropriate Box To Indicate Nature of Notice, Report, or	Other Data
	NOTICE OF INTENTION TO:	QUENT REPORT OF:
m.mpp. 0	HUT-OFF PULL OR ALTER CASING WATER SHUT-OFF	REPAIRING WELL
TEST WATER S	WDACTURE TREATMENT	ALTERING CASING
SHOOT OR ACID	Y SPOOTING OF SUBINING	ABANDON MENT*
REPAIR WELL	CHANCE PLANS (Other)	
(Norg: Report results		ts of multiple completion on Well pletion Report and Log form.)
	SED OR COMPLETED OPERATIONS (Cleurly state all pertinent details, and give pertinent date rk. If well is directionally drilled, give subsurface locations and measured and true verti	s including estimated date of starting any
Propose to	):	
across 35 sac	on Pictured Cliffs zone by spotting a 100 sack Class "I s perforations from 3928'- 3993'. Pulling tubing above cks of cement plug into perforations. Top of cement particles of cement particles of the Ojo Alamo zone. This operation will be a the telephone by Bernie Mahony and Jerry Long on October	e plug and squeezing lug will be at 3550' performed as discussed
2) Propos at a J	sal to cut off casing and permenantly abandon this well later date.	1 will be submitted
RECE OCT 1 U. S. GEOL FARMIN	IVED  O 1979  OGICAL SURVEY NGTON, N. M.	

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

TITLE District Production Manager DATE

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_\_\_ CONDITIONS OF APPROVAL, IF ANY:

TITLE