Form 3160-5 (November 1983) (Formerly 9-331)	UNITED S DEPARTMENT OF BUREAU OF LAND	THE INTERI	/	Budget Expire 5. LEASE DEA	s August 31, 1985
SUN (Do not use this	NDRY NOTICES AND form for proposals to drul or use "APPLICATION FOR PEI	REPORTS C to deepen or plug be RMIT—" for such pr	N WELLS ck to a different reservoir. oppossis.)	6. IF INDIAN	SHAN BEIST SO SETTOJJA.
OIL GAS	Ov otesa			7. UNIT AGES	BEAN THEMS
2. NAME OF OPERATOR				S. PARM OR	LEASE NAME
	Southland Roya	lty Compan	<u>Y</u>	Hubbe	211
3. ADDRESS OF OPERATO		. 1200 ===		9. WELL HO.	
4. LOCATION OF WELL (See also space 17 be At surface	Post Office Bo: Report location clearly and in action.) NW/4 SE/4	cordance with any S	mington, NM 8/49 Itate réquirements.*	10. PIBLD AN	Dig Cliffa
	•				Pic.Cliffs
	1650/3 1850/5				29,T-28-N,R-11-1
14. PERMIT NO.	15. BLEVATION	s (Show whether DF,	RT. CR. etc.)	N.M.F	DE PARISE 13. STATE
	·			San J	Juan NM
16.	Check Appropriate Bo	x To Indicate No	sture of Notice, Report,	or Other Data	
	NOTICE OF INTENTION TO:	. •		BESQUENT REPORT OF) :
TEST WATER SHUT-	PCLL OR ALTER (CASING	WATER SHUT-OFF		PAIRING WELL
FRACTURE TREAT	ACLTIPLE COMP	ETE	FRACTURE TREATMENT	AL	TERING CASING
SHOOT OR ACIDIZE	ABANDON*	~_	SHOOTING OR ACIDIZING	48	VNDONMENT.
REPAIR WELL (Other)	CHANGE PLANS	-	(Other)	sults of multiple co	mpletion on Well
T OUSCRIBE PROPUSED O	R COMPLETED OPERATIONS (Clean) [well is directionally drilled, gi	7 state all pertinent	Completion or Rec	ompletion Report an	nd Log form.)
or rec Recomp succes abando and sq under holds, the ca	etter of August omplete this well letion to the Francisco interest of the state of the state of the retainer. Can be a recompletion of the sing will result and the dated 12-	l by Septer uitland Co grity test cement re G cu.ft.) asing will will be ma in pluggi	mber 6, 1988. al will be atte . The Pictured tainer in the 5 of Class "B" ne be tested to 2 de to the coal ng and abandonm	mpted pend Cliffs wi 1/2" casi at cement 500 psi. interval. ent uphole	ding a .11 be .ng at 1985' (100% excess) If the casing Failure of
				- 1 	
8. I hereby certify that	the foregoind is true and corre		gulatory Affair	s (CB)DATE	08-12-88
(This space for Fede	eral or State office use)				
APPROVED BY		TITLE		A.D	PROVED
	PPROVAL, IF ANT:			7 ~\4	AUG 1 6 1988
		C 1	D Ct.d.	J	2K SKelly