

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

<p>1. Type of Well GAS</p> <hr/> <p>2. Name of Operator Southland Royalty Co</p> <hr/> <p>3. Address & Phone No. of Operator Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec, T, R, M. 990'N, 990'E Sec. 29, T-28-N, R-10-W, NMPM</p>	<p>5. Lease Number SF-077084</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name</p> <p>8. Well Name & Number Lackey Hubbell #2</p> <p>9. API Well No.</p> <p>10. Field and Pool Basin Fruitland Coal</p> <p>11. County and State San Juan County, NM</p>																								
<p>12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA</p> <table border="0" style="width: 100%;"><thead><tr><th style="text-align: left;">Type of Submission</th><th style="text-align: left;">Type of Action</th></tr></thead><tbody><tr><td><input type="checkbox"/> Notice of Intent</td><td><input type="checkbox"/> Abandonment</td></tr><tr><td><input checked="" type="checkbox"/> Subsequent Report</td><td><input checked="" type="checkbox"/> Recompletion</td></tr><tr><td><input type="checkbox"/> Final Abandonment</td><td><input type="checkbox"/> Plugging Back</td></tr><tr><td></td><td><input type="checkbox"/> Casing Repair</td></tr><tr><td></td><td><input type="checkbox"/> Altering Casing</td></tr><tr><td></td><td><input type="checkbox"/> Other</td></tr><tr><td></td><td><input type="checkbox"/> Change of Plans</td></tr><tr><td></td><td><input type="checkbox"/> New Construction</td></tr><tr><td></td><td><input type="checkbox"/> Non-Routine Fracturing</td></tr><tr><td></td><td><input type="checkbox"/> Water Shut Off</td></tr><tr><td></td><td><input type="checkbox"/> Conversion to Injection</td></tr></tbody></table>		Type of Submission	Type of Action	<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input checked="" type="checkbox"/> Subsequent Report	<input checked="" type="checkbox"/> Recompletion	<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back		<input type="checkbox"/> Casing Repair		<input type="checkbox"/> Altering Casing		<input type="checkbox"/> Other		<input type="checkbox"/> Change of Plans		<input type="checkbox"/> New Construction		<input type="checkbox"/> Non-Routine Fracturing		<input type="checkbox"/> Water Shut Off		<input type="checkbox"/> Conversion to Injection
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<p>13. Describe Proposed or Completed Operations</p> <p>11-7-90 MOL&RU. Bled down. ND WH. NU BOP. LD 97 jts 1" tbq. SDFN.</p> <p>11-8-90 Kill well w/30 BW. Ran GR--CNL--CCL 1400-2150'. Set CIBP @ 2104'. PT 1000#, ok. Ran CBL 2104-surface. TIH, spot 150 gal. 15% HCl acid. Pull up to 1500'. Swabbed. SDFN.</p> <p>11-9-90 Perf 1952-69', 1983-94', 2012-15', 2018-20', 2072-2102'. TIH w/SPIT tool. BD perfs. TOOH w/tool. Ran 66 jts 2 3/8", 4.7#, J-55 EUE tbq landed @ 2080'. SN @ 2053'. ND BOP. NU WH. Swabbed. SDFN.</p> <p>11-10-90 Swabbed. Released rig.</p>																									

14. I hereby certify that the foregoing is true and correct
Signed [Signature] Title Regulatory Affairs Date 11-13-90

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITION OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

DEC 26 1990
DATE

FARMINGTON RESOURCE AREA

BY [Signature]