UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

5.	LEASE	
SI	7-079583	

6.	ΙF	INDIAN,	ALL	TTO.	EE	OR	TRIBE	NAME

SUNDRY	NOTICES	AND	REPORTS	ON	WELLS
(Do not use this for reservoir. Use Form	rm for proposals 9-331-C for suc	to drill o	or to deepen or pals.)	olug bac	k to a different

,	HINIT	AGREEMENT	NAME
٠.	UITE	AGILEEMEN	1 47 (14)

1.	oil	gas	ĺΣ	, 1 le	

8. FARM OR LEASE NAME Newman "C"

2. NAME OF OPERATOR

S. WELL NO #lE

Southland Royalty Company

10. FIELD OR WILDCAT NAME

3. ADDRESS OF OPERATOR

Undes. Fruitland/Basin Dakota

P. O. Drawer 570, Farmington, NM 87401 4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17 11. SEC., T., R., M., OR BLK. AND SURVEY OR

AT SURFACE: 1555' FNL & 790' FWL

Sec. 30, T28N, R10W

AT TOP PROD. INTERVAL:

12. COUNTY OR PARISH 13. STATE NM San Juan

AT TOTAL DEPTH:

14. API NO.

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

15. ELEVATIONS (SHOW DF, KDB, AND WD)

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE

SUBSEQUENT REPO

FEBUU SURVEY
Change on Form 9-330.)

SEARMINGTON.

REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Undesignated Fruitland zone will not be completed in this well.



Subsurface Safety Valve: Manu. and Type

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

TITLE District Prod. Mgr DATE

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

__ DATE _

NMOCC

*See Instructions on Reverse Side

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