

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐
2. NAME OF OPERATOR
Southland Royalty Company
3. ADDRESS OF OPERATOR
P.O. Drawer 570, Farmington, NM 87499
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL & 775' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

(other) See Below

SUBSEQUENT REPORT OF:

- ☐
☐
☐
☐
☐
☐
☐
☐

RECEIVED

(NOTE: Report results of multiple completion or zone change on Form 9-330.)
DEC 09 1983

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

5. LEASE
SF-077966
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Gallegos Canyon Unit
9. WELL NO.
112
10. FIELD OR WILDCAT NAME
Cha Cha Gallup
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 23, T28N, R13W
12. COUNTY OR PARISH San Juan 13. STATE New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
5849' GR

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.)*

SRC proposes to swab test this well within 30 days to evaluate for pumping unit installation. Further testing will follow tests of other GCU wells by available portable units. Weather and equipment availability should allow testing to be completed by 7-1-84.

OIL CON. DIV.
DIST. 3

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED [Signature] TITLE Pet. Engineer DATE 12-6-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ok
This Approval is Temporary
Abandonment Expires 7-7-84

*See Instructions on Reverse Side

NMOCC

APPROVED

DEC 12 1983
M. MILLENBACH
AREA MANAGER
[Signature]