

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Form Approved.  
Budget Bureau No. 42-R1424

**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: 810' FNL & 2130' 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:

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DEC 09 1983

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

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.  
115  
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)  
5995' 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.)\*

9-14-83 MIRU Service Unit. Spud no-go to 4265'.  
9-15-83 Cut paraffin to 4800'. Load tubing with 5 bbls of diesel. SI for night.  
9-16/17-83 Pumped 10 bbls diesel. Could not get below 4820' with paraffin knife.  
9-18-83 Attempted to pull tubing. Tubing parted at 900'. Rig down and moved off.

SRC proposes to re-enter well and recover tubing with a bigger rig within 30 days. Tubing will be run for swab testing to evaluate for pumping unit installation. Weather and equipment availability should allow testing to be completed by 7-1-84.

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:

chd

APPROVED

\*See Instructions on Reverse Side

This Approval or Temporary  
Abandonment Expires 7-1-84

NMOCC

DEC 12 1983  
B. B. BUSHAW  
M. MILLENBACH  
BCT AREA MANAGER  
[Signature]