

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM 4456
2. NAME OF OPERATOR Southland Royalty Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Post Office Box 4289, Farmington, NM 87499	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 860'N, 1770'W	8. FARM OR LEASE NAME Cat Draw
14. PERMIT NO.	9. WELL NO. 1E
15. ELEVATIONS (Show whether DP, RT, GR, etc.)	10. FIELD AND POOL, OR WILDCAT Basin Dk/Blanco MV
	11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Sec. 4, T-30-N, R-5 - N.M.P.M.
	12. COUNTY OR PARISH Rio Arriba NM
	13. STATE

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

It is intended to perform the following work on this well:

MOL&R&. NU BOP, blow lines & stripping head. Blow all zones down. Tie into short string, clean to pkr w/N2. Set choke in MV tbg. POOH w/short string, visually inspect tbg. Release Baker Model "R" pkr, POOH replacing bad jts. Hav packer redressed. TIH, hydrotest tbg above slips and above pkr. Coordinate blast joints w/MV perfs. Land long string @ 7974', set pkr @ 5935'. TIH, rabbit tbg. Land short string @ 5771'. NU WH. Swab well. RD. Release rig. Return well to production.

RECEIVED
JUN 17 1988
OIL CON. DIV
DIST. 3

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

SIGNED

TITLE Drilling Clerk (WS)

DATE 6-13-88

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
JUN 15 1988
AREA MANAGER

NMOCC

*See Instructions on Reverse Side