

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Southland Royalty Company.	8. FARM OR LEASE NAME Simms Federal
3. ADDRESS OF OPERATOR P.O. Box 4289 Farmington, New Mexico 87499	9. WELL NO. 4
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 890'S, 845'E	10. FIELD AND POOL, OR WILDCAT Blanco Pic. Cliffs
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 36, T30N, R4W NMPM
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7104' GL	12. COUNTY OR PARISH Rio Arriba
	13. STATE NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Plug Back <input checked="" type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <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.)\*

This well will be recompleted in the Fruitland Coal. The Pictured Cliffs will be abandoned by setting a cement retainer in the 4 1/2" casing @ 3796' and cement squeezing the perforations with 42 cu.ft. of class "B" neat. The casing will be pressure tested to 3500 psi. The coal will be completed across the interval 3728'-3791'. This operation is expected to be completed by 5-1-89.

RECEIVED  
SEP 06 1988  
OIL CON. DIST. 9

RECEIVED  
SEP 06 1988  
OIL CON. DIST. 9

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

SIGNED [Signature] TITLE Regulatory Affairs DATE 8-25-88

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE AREA MANAGER  
CONDITIONS OF APPROVAL, IF ANY:

APPROVED  
SEP 01 1988  
[Signature]  
AREA MANAGER

\*See Instructions on Reverse Side