

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 ☐ gas ☒ other

2. NAME OF OPERATOR
Southland Royalty Company

3. ADDRESS OF OPERATOR
P.O. Drawer 570, Farmington, New Mexico 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1050' FNL & 1650' FWL
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* ☐

SUBSEQUENT REPORT OF:

(other) Casing Report

5. LEASE

SF-076958

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hare

9. WELL NO.

19-E

10. FIELD OR WILDCAT NAME

Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Section 23-T29N-R10W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

14. API NO.

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

5746' GR

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

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.)*

11-17-79 Ran 162 joints (6705.32') of 5-1/2", 15.5#, K-55 casing set at 6703'. Cemented 1st Stage with 215 sacks Class "B" 50/50 Poz, 6% gel and 1/4# per sack gel flake followed by 50 sacks Class "B" and 2% CaCl₂. Cemented 2nd Stage with 300 sacks Class "B" 50/50 Poz, 6% gel and 1/4# per sack gel flake.
11-18-79 Cemented 3rd Stage with 200 sacks Class "B" 50/50 Poz, 6% gel and 1/4# per sack gel flake followed by 100 sacks Class "B" and 2% CaCl₂. Top of Cement at 900'.

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED

TITLE Dist. Prod. Mgr.

DATE November 19, 1979

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NMOCC

*See Instructions on Reverse Side

APPROVED

NOV 29 1979

JAMES F. SIMS
DISTRICT OIL & GAS SUPERVISOR