

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATES  
(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.)

OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-6889
NAME OF OPERATOR Southland Royalty Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
ADDRESS OF OPERATOR P.O. Drawer 570, Farmington, NM 87499		7. UNIT AGREEMENT NAME
LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 875' FNL & 1790' FEL		8. FARM OR LEASE NAME Reese Mesa
14. PERMIT NO.		9. WELL NO. 10
15. ELEVATIONS (Show whether OF, RT, GR, etc.) 7017' GL		10. FIELD AND POOL, OR WILDCAT Albino Pictured Cliffs
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 10, T32N, R8W
		12. COUNTY OR PARISH San Juan
		13. STATE New Mexico

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) TD, 4-1/2" Csg, Tmp. Survey <input checked="" 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.) \*

8/26/84 TD 7-7/8" hole at 4130'.

8/28/84 Ran 92 joints (4117') of 4-1/2", 10.5#, K-55 casing set at 4129'. Cemented with 470 sacks (658 cu.ft.) of Class "B" 50/50 Poz with 1/4# celloflake per sack and 6% gel, followed with 75 sacks (87.8 cu.ft.) of Class "B" neat with 2% CaCl<sub>2</sub>. Plug down at 10:15 AM 8-28-84. Good circ. Ran temperature survey - TOC at 1200'. Well now WOCT.

RECEIVED  
SEP 07 1984  
OIL CON. DIV.  
DIST. 3

I hereby certify that the foregoing is true and correct

SIGNED <u>Steve [Signature]</u>	TITLE <u>Secretary</u>	DATE <u>8-30-84</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

ACCEPTED FOR RECORD

SEP 11 1984

\*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

RV

NMOCC