

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS <small>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT - II" (FORM C-101) FOR SUCH PROPOSALS.)</small>		
1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name	
2. Name of Operator SOUTHLAND ROYALTY COMPANY	8. Farm or Lease Name Moore	
3. Address of Operator P. O. DRAWER 570, Farmington, New Mexico 87401	9. Well No. 3	
4. Location of well UNIT LETTER <u>J</u> <u>1825</u> FEET FROM THE <u>South</u> LINE AND <u>1650</u> FEET FROM THE <u>East</u> LINE, SECTION <u>35</u> TOWNSHIP <u>32N</u> RANGE <u>12W</u> NMPM.	10. Field and Pool, or which Blanco Pictured Cliffs Undesignated Fruitland G-Index	
15. Elevation (Show whether DF, RT, GR, etc.) 6378' GR	12. County San Juan	

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUS AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUS AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	RE-SEEDING <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

9-11-82

"Re-seeding has been completed as per stipulation."

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED John J. Chavez TITLE Secretary DATE October 7, 1982

Original Signed by FRANK T. CHAVEZ
APPROVED BY _____ TITLE _____ DATE OCT 12 1982
CONDITIONS OF APPROVAL, IF ANY: