

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

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|---|---|
| <p>1. Type of Well
GAS</p> <hr/> <p>2. Name of Operator
SOUTHLAND ROYALTY COMPANY</p> <hr/> <p>3. Address & Phone No. of Operator
PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec., T, R, M
1760' FNL, 440' FEL, Sec.13, T-29-N, R-12-W, NMPM</p> | <p>5. Lease Number
SF-075587</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name</p> <p>8. Well Name & Number
Reid #2</p> <p>9. API Well No.
30-045-08358</p> <p>10. Field and Pool
Fulcher Kutz Pict.Cliffs</p> <p>11. County and State
San Juan Co, NM</p> |
|---|---|

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

Type of Submission	Type of Action	
<input checked="" type="checkbox"/> Notice of Intent	<input checked="" type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other -	

13. Describe Proposed or Completed Operations

It is intended to plug and abandon the subject well. A procedure will be submitted by 4-1-96.

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

Signed *Regulatory Administrator* (LWD2) Title Regulatory Administrator Date 12/1/95

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

APPROVED

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