

**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

5. LEASE DESIGNATION AND SERIAL NO.  
NM-93

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

**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. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
Southland Royalty Company

3. ADDRESS OF OPERATOR  
21 Desta Drive, Midland, Texas 79705

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1980' FWL & 660' FNL, Sec. 18, T18S, R33E

*unit c*

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3859' GR

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
W. Corbin Federal

9. WELL NO.  
17

10. FIELD AND POOL, OR WILDCAT  
W. Corbin (Delaware)

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

Sec. 18, T18S, R33E

12. COUNTY OR PARISH 13. STATE  
Lea NM

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON\*

SHOOTING OR ACIDIZING

ABANDONMENT\*

REPAIR WELL

CHANGE PLANS

(Other)

Cmt. 8 5/8" Csg & 5 1/2" Csg

(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.)\*

11/22/89 Set 8 5/8" Csg. @ 368'.  
Cmt. w/ 250 sx Class "C" w/ 2% CaCl<sub>2</sub>. P.D. @ 8:05 a.m.  
Circ. 60 sx.

11/30/89 Set 5 1/2" Csg. @ 5520'.  
Cmt. w/ 970 sx Class "C" Lite & 310 sx Class "C" Neat.  
P. D. @ 9:00 p.m.

*Adm*

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

SIGNED Robert L. Bradshaw

TITLE Sr. Staff Env./Reg. Spec.

DATE 12/04/89

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side