

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

Sundry Notices and Reports on Wells

1. Type of Well GAS	5. Lease Number NM-01772A
2. Name of Operator Southland Royalty	6. If Indian, All. or Tribe Name
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700	7. Unit Agreement Name
4. Location of Well, Footage, Sec., T, R, M 1155'FSL, 1450'FEL Sec.7, T-28-N, R-9-W, NMPM	8. Well Name & Number Reid #14
	9. API Well No. 30-045-
	10. Field and Pool Aztec Pic.Cliffs
	11. County and State San Juan Co, NM

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 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 checked="" type="checkbox"/> Other - Evaluation	<input type="checkbox"/> extension

13. Describe Proposed or Completed Operations

The subject well is unable to produce against line pressure. An extension until March 1, 1993 is requested to evaluate alternatives to return the well to a useful condition or permanently abandon.

THIS APPROVAL EXPIRES MAR 01 1993

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

Signed [Signature] (DB) Title Regulatory Affairs Date 10/29/92

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

CONDITION OF APPROVAL, if any:

Date
APPROVED

NOV 02 1992

AREA MANAGER

NMOCG