

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other
2. NAME OF OPERATOR
Southland Royalty Company
3. ADDRESS OF OPERATOR
PO Drawer 570, Farmington, New Mexico 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other) <i>Casing Report</i>	<input checked="" type="checkbox"/>

5. LEASE
SF-65546A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Newman "A"
9. WELL NO.
8-E
10. FIELD OR WILDCAT NAME
Basin Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 19, T28N, R10W
12. COUNTY OR PARISH *San Juan* 13. STATE *New Mexico*
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
5999' GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

1-28-80 Ran 152 joints (6640') of 5-1/2", 15.5#, K-55, 8rd, ST&C casing and set at 6650'.

1-29-80 Cemented 1ST STAGE with 160 sacks of Class "B" 50/50 Poz with 6% gel, 1/4# gel flake per sack followed by 50 sacks of Class "B" neat with 2% CaCl₂. Plug down at 7:30 A.M. 1-29-80. Cemented 2ND STAGE with 270 sacks of Class "B" 50/50 Poz with 6% gel tailed in with 50 sacks of Class "B" neat with 2% CaCl₂. Plug down at 11:45 A.M. 1-29-80. Cemented 3RD STAGE with 165 sacks of Class "B" 50/50 Poz with 6% gel. Plug down at 2:00 P.M. 1-29-80. Circulated cement. WOOT
Top of cement at 1200'.

Subsurface Safety Valve: Manu. and Type

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

SIGNED

TITLE *Dist. Prod. Mgr.* DATE *January 30, 1980*

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NMOCC

ACCEPTED FOR RECORD

*See Instructions on Reverse Side

FEB 5 '80

DISTRICT
M&R