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U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease  
State  Fee

5. State Oil & Gas Lease No.

**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..." (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER _____	7. Unit Agreement Name
2. Name of Operator Southland Royalty Company	8. Farm or Lease Name Trujillo Federal
3. Address of Operator P.O. Drawer 570, Farmington, New Mexico 87499	9. Well No. 1
4. Location of Well UNIT LETTER <u>H</u> <u>1910</u> FEET FROM THE <u>North</u> LINE AND <u>810</u> FEET FROM THE <u>East</u> LINE, SECTION <u>1</u> TOWNSHIP <u>29N</u> RANGE <u>4W</u> NMPM.	10. Field and Pool, or Wildcat E. Blanco P.C. Ext.
15. Elevation (Show whether DF, RT, GR, etc.) 6957' GL	12. County Rio Arriba

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER _____ <input type="checkbox"/>	OTHER _____ <input type="checkbox"/>
PLUG AND ABANDON <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input 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.

Southland Royalty Company hereby proposes to P&A this well as follows:

Spot 100' of cement plugs from 3681'-3581', 3540'-3440', 3360'-3260', 275'-175',  
50' plug from 50' to surface with 135 sacks (159 cu.ft.) of Class "B" cement.  
Install dry hole marker.

**RECEIVED**  
FEB 10 1984  
OIL CON. DIV.  
DIST. 3

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

SIGNED Catherine J. Guzman TITLE Secretary DATE 2/08/84

APPROVED BY Original Signed by FRANK T. CHAVEZ TITLE SUPERVISOR DISTRICT # 3 DATE FEB 10 1984

CONDITIONS OF APPROVAL, IF ANY: