

NUMBER COPIES RECEIVED	4
DISTRIBUTION	
SANTA FE	1
FILE	✓
U.S.G.S.	
LAND OFFICE	
OPERATOR	2

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

SUNDRY NOTICES AND REPORTS ON WELLS <small>(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.)</small>		5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		5. State Oil & Gas Lease No.
2. Name of Operator Southland Royalty Company		7. Unit Agreement Name
3. Address of Operator P. O. Drawer 570, Farmington, New Mexico		8. Farm or Lease Name Decker "A"
4. Location of Well 810 FEET FROM THE North LINE AND 1160 FEET FROM East LINE, SECTION 3 TOWNSHIP 31N RANGE 12W NMPM.		9. Well No. #1-A
15. Elevation (Show whether DF, RT, GR, etc.) 6193' GL		10. Field and Pool, or Wildcat Blanco Mesa Verde
		12. County San Juan

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

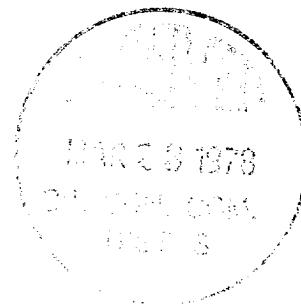
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☒ Spud & Casing Report

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.

3-20-78 Spudded 12-1/4" surface hole at 8:30 PM to a TD 230'. Ran 5 joints of 9-5/8", 36#, K-55 casing. Set at 222'. Cemented with 110 sacks Class "B" with 1/4# gel flake per sack and 3% CaCl. Plug down at 1:45 AM 3-21-78



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

SIGNED A. R. Kendrick

TITLE District Production Manager

DATE March 21, 1978

Original Signed by A. R. Kendrick

APPROVED BY _____

TITLE SUPERVISOR DIST. MGR

DATE _____

CONDITIONS OF APPROVAL, IF ANY: