

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.5. LEASE DESIGNATION AND SERIAL NO.  
SF-077651

## 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 <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 Richardson
3. ADDRESS OF OPERATOR P. O. Drawer 570, Farmington, New Mexico	9. WELL NO. #5A
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1645' FSL & 1000' FEL	10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6144' GR
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 21, T31N, R12W	
12. COUNTY OR PARISH San Juan	
13. STATE New Mexico	

16.

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) MiscellaneousPULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANS ☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐(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.)\*

To change company name from Aztec Oil & Gas Company to Southland Royalty Company.  
Effective 1-1-78

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

SIGNED [Signature]TITLE Dist. Production Mgr.DATE 1-26-78

(This space for Federal or State office use)

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

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side