UNITED STATES SUBMIT IN TRIPLICATE* DEPARTMENT OF THE INTERIOR (Other instructions on reverse side) GEOLOGICAL SURVEY

Form approved, Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND BERIAL NO.

SHNDRY	NOTICES	AND	REPORTS	ON WELLS

	S	F-	0	78	11	15				
	6.	1F	IN	DIA	N,	ALLO	TTE	OR	TRIBE	3 MAN
-	7.	UN	ľ	AGE	EE	MEN	r Na	ME		

	is form for propos	ICES AND RE	pen or plug b	ack to a different reservoir.	6. IF INDIAN, ALLOTTE	OR TRIBE NAME
OIL GAS WELL WELL	X OTHER				7. UNIT AGREEMENT NA	ME
2. NAME OF OPERATOR					8. FARM OR LEASE NAM	4E
Southland F	byalty Comp	any			Dusenberry	
3. ADDRESS OF OPERAT	OR				9. WELL NO.	
P. O. Drawe	r 570, Farm	#4				
4. LOCATION OF WELL	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*					
See also space 17 b At surface	eiow.)		Blanco Pictured Cliffs			
					11. SEC., T., R., M., OR BLK. AND	
990'	FNL & 1760	' FWL			SURVEY OR AREA	
					Section 6, T3	BlN, RllW
14. PERMIT NO.		15. ELEVATIONS (Sh	ow whether DF,	RT, GR, etc.)	12. COUNTY OR PARISH	
			6475' GR		San Juan	New Mexico
16.	Check Ap	propriate Box To	Indicate N	ature of Notice, Report, or O	ther Data	
	NOTICE OF INTENT	TION TO:	!	SUBSEQU	ENT REPORT OF:	
**************************************		ULL OR ALTER CASING		WATER SHUT-OFF	REPAIRING V	WIRLT.
TEST WATER SHUT			* <u>-</u> -	FRACTURE TREATMENT	ALTERING CA	
FRACTURE TREAT	<u> </u>	ULTIPLE COMPLETE		SHOOTING OR ACIDIZING	ABANDONME	
SHOOT OR ACIDIZE		BANDON*			J	`` _A
REPAIR WELL	e	HANGE PLANS		(Other)	of multiple completion	on Well
17. DESCRIBE PROPOSED proposed work. nent to this work	If well is direction	RATIONS (Clearly stat nally drilled, give su	e all pertinent bsurface locati	Completion or Recomple details, and give pertinent dates, ons and measured and true vertical	including estimated dat	e of starting any
1-27-79	Plug down	at 2:00 AM,	1-27-79.	from 3150' to 2826'.		
	-	sacks of Cl		from 2275' to 2500'.		

Spotted 35 sacks of Class "B" from 216' to 111'. Plug down at 6:40 AM, 1-27-79.

Spotted 10 sacks of Class "B" at surface and installading dry hole marker.

NOTE: Pit has been leveled and location will be reseeded within 2 weeks. Notice will be given when location is ready for final inspection.

18. I hereby certify that the foregoing is true and correct SIGNED	TITLE District Production Manager	DATE 7-24-79
(This space for Federal or State office (se)		
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE