Form 9-331 (May 1963)	UNITED STATES DEPARTMENT OF THE INTE	SUBMIT IN TRIPLICATE®	Form approved. Budget Bureau No. 42-R1424.
	GEOLOGICAL SURVEY	verse side)	J. LEASE DESIGNATION AND SERIAL NO.
SUNDRY NOTICES AND REPORTS ON WELLS			NM-01614 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
(Do not use	this form for proposals to drill or to deepen or plu Use "APPLICATION FOR PERMIT—" for such	ig back to a different reservoir.	A TEINE NAME
OIL GAWE',L GAW	ELL X OTHER		7. UNIT AGREEMENT NAME
Southland Royalty Company			8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR			Thompson 9. Well No.
P. O. Drawer 570, Farmington, NM 87401			#4-A
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. At surface			10. FIELD AND POOL, OR WILDCAT
1680' FSL & 1140' FEL			Blanco Mesa Verde
	1000 LDU % 1140 LET		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
14. PERMIT NO.	15. ELEVATIONS (Show whether	DF, RT, GR, etc.)	Section 27, T31N, R12W
	6188' GR		San Juan New Movies
16.	Check Appropriate Box To Indicate	Nature of Notice, Report, or Ot	her Data
	NOTICE OF INTENTION TO:		NT REPORT OF:
TEST WATER SH	TODE ON ALIER CASING	WATER SHUT-OFF	
FRACTURE TREAT	MULTIFLE COMPLETE	FRACTURE TREATMENT	REPAIRING WELL ALTERING CASING
SHOOT OR ACIDIZ REPAIR WELL	abandon	SHOOTING OR ACIDIZING	ABANDONMENT*
(Other)	CHANGE PLANS	(Other)	Casing Report v
	ED OR COMPLETED OPERATIONS (Clearly state all pertine . If well is directionally drilled, give subsurface loc rk.)*	Completion or Recomplet	multiple completion on Well ion Report and Log form.)
2-17-79	Set 69 joints (2852.36') of 7 160 sacks of Class "B", 50/50 Class "B" with 2% CaCl ₂ . Plu	7", 20#, K-55 casing at	2846'. Cemented with
2-21-79	Set 62 joints (2613') of 4 1/ Cemented with 360 sacks of Cla flake and .6% Halad 9. Left Plug down at 4:45 AM, 2-21-79	approximately 7501 of	
3. I hereby certify th	at the foregoing is true and correct	U. S. DEOLOGICAL	FEB 23 1979 OIL DIST. 3 OIL DIST. 3
			OIN OIL
SIGNED		trict Production Manage	r _{DATE} 2-21-79
(This space for Fe	deral or State office use)		
APPROVED BY CONDITIONS OF .	APPROVAL, IF ANY:		DATE

*See Instructions on Reverse Side