Form 9-331 (Mar 1963)	UNITED STATES SUBMIT IN TRIPL DEPARTMENT OF THE INTERIOR (Other instructions verse side)	on re Budget Bureau No. 42-R1424
	GEOLOGICAL SURVEY	5. LEASE DESIGNATION AND SERIAL NO. NM-01614
(Do no	SUNDRY NOTICES AND REPORTS ON WELLS of use this form for proposals to drill or to deepen or plug back to a different reservoir Use "APPLICATION FOR PERMIT—" for such proposals.)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
OIL WE'LL	GAS WELL X OTHER	7. UNIT AGREEMENT NAME
2. NAME OF O		8. FARM OR LEASE NAME
3. ADDRESS OF	uthland Royalty Company	Thompson 9. Well No.
4. LOCATION O	O. Drawer 570, Farmington, NM 87401 FWELL (Report location clearly and in accordance with any State requirements.*	#2-A 10. FIELD AND FOOL, OR WILDCAT
	960' FNL & 1070' FEL	Blanco Mesa Verde J1. SEC., T., R., M., OE BLK. AND SURVEY OR AREA
14. PERMIT NO.	20. 220 ALTONS (Blow whether Dr. RI, GR, etc.)	Section 28, T31N, R12W
16.	6171' GR	San Juan NM
	Check Appropriate Box To Indicate Nature of Notice, Report Notice OF INTENTION TO:	
TEST WATI	ER SHUTJOSE DULL OR ALTER CLOSES	SUBSEQUENT REPORT OF:
FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT WATER SHUT-OFF FRACTURE TREATMENT		T ALTERING CASING
SHOOT OR	SHOOTING OR ACIDIZI	NG ABANDONMENT*
REPAIR WE (Other)	CHANGE PLANS (Other)(NOTE: Report	results of multiple completion on Well
17. DESCRIBE PR	ROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinen work. If well is directionally drilled, give subsurface locations and measured and true his work.)*	Recompletion Report and Log form.)
nent to th	his work.) *	terrical depths for all markers and zones perti-
1-14-79	Ran 81 joints of 7", 20#, 8 rd, K-55 casing and swith 200 sacks of 50/50, Class "B", Poz with 6% gof Class "B" with 2% CaCl ₂ . Plug down at 9:45 PM	el followed by 50 sacks
1-18-79 Ran 63 joints of 4 1/2", 10.5#, K-55, 8 rd casing and set from 2648' 5252'. Cemented with 305 sacks of 50/50, Class "B", Poz with 6% gel, celloflake and .6% Halad 9. Plug down at 2:30 AM, 1-18-79.		B", Poz with 6% gel 1/4#
		.
18. I hereby cer	rtify that the foregoing as true and correct	
SIGNED	TITLE District Production	Manager DATE 1-18-79

*See Instructions on Reverse Side

DATE _

Mode

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY: