OMAY 1963) UNITED STATES DEPARTMENT OF THE INTER GEOLOGICAL SURVEY	SUBMIT IN TRIPLICATE* [Other instructions on reverse side)	Form approved. Budget Rureau No. 42-R1424. 5. LEASE DESIGNATION AND BERIAL NO. NM-6893 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS (Do not use this form for proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such p	ON WELLS back to a different reservoir. proposals.)	O. IF INDIAN, ADDOTTED ON TELES IN AME
1.		7. UNIT AGREEMENT NAME
OIL GAS OTHER 2. NAME OF OPERATOR		8. FARM OR LEASE NAME
Southland Royalty Company		Wilmer Canyon
3. ADDRESS OF OPERATOR		9. WELL NO.
P O Drawer 570, Farmington, NM 87401		#2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface		10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde N. Ios Pinos Fruitland 11. SEC., T., R., M., OR BLK. AND
1170' FNL & 1800' FWL		SURVEY OR ARDA
		Section 25, T32N, R8W
14. PERMIT NO. 15. ELEVATIONS (Show whether Di	F, RT, GR, etc.)	12. COUNTY OF PARISH 13. STATE
	l' GR	San Juan NM
16. Check Appropriate Box To Indicate N	Notice Report or	Other Data
		QUENT REPORT OF:
NOTICE OF INTENTION TO:	SUBSEC	
TEST WATER SHUT-OFF PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE ABANDON* SHOOT OR ACIDIZING ABANDONMENT* CHANGE PLANS (Other) Production Tubing Report X		n Tubing Report X
REPAIR WELL CHANGE PLANS	(Nome - Papart result	s of multiple completion on Well
(Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertine)		pletion Report and Log form.) , including estimated date of starting any
proposed work. It well is directionally drined, give substitute for nent to this work.) •	and medical and me	•
8-7-79 Landed 200 joints (6207.58') of : Landed 122 joints (3852.54') of :	2 3/8", 4.7#, EUE tub 1 1/2", 2.9#, CSR-55,	EUE tubing at 3863.54'.
	AUG 14 19 OIL CON. COI DIST. 3	79 Jeous Schwer
SIGNED TITLE Di (This space for Federal or State office use)	strict Production Mar	nager 8-8-79

*See Instructions on Reverse Side

DATE _____

APPROVED BY ______ CONDITIONS OF APPROVAL, IF ANY: