

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other

2. NAME OF OPERATOR
Southland Royalty Company

3. ADDRESS OF OPERATOR
P.O. Drawer 570, Farmington, New Mexico 87401

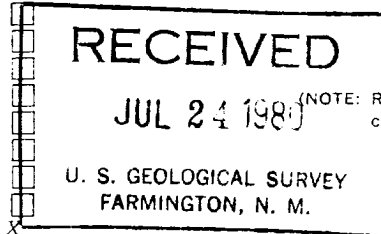
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: *1045' FSL & 1695' FWL*
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) *Casing Report* ☒

SUBSEQUENT REPORT OF:



5. LEASE

SF-077652

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

East

9. WELL NO.

10-M

10. FIELD OR WILDCAT NAME

Basin Dakota/Blanco Mesa Verde

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Section 26, T31N, R12W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

6069' GR

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.)*

*7-04-80 Ran 112 joints (4769') of 7-5/8", 26.40#, K-55 casing set at 4758'.
DV tool at 2719'. Cemented 1st Stage with 100 sacks of Class "B"
50/50 Poz with 6% gel followed by 50 sacks of Class "B" neat with
2% CaCl₂. Plug down at 7:00 P.M. 7-05-80. Cemented 2nd Stage with
225 sacks of Class "B" 50/50 Poz with 6% gel followed by 70 sacks of
Class "B" neat with 2% CaCl₂. Plug down at 9:30 P.M. 7-05-80.
Top of Cement at 1200'.*

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED *[Signature]* TITLE *Dist. Prod. Mgr.* DATE *July 21, 1980*

ACCEPTED FOR RECORD

(This space for Federal or State office use)

APPROVED *AUG 04 1980* TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

BY *[Signature]*
FARMINGTON DISTRICT

RMOCG

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☐ gas ☒ other ☐

2. NAME OF OPERATOR

Southland Royalty Company

3. ADDRESS OF OPERATOR

P.O. Drawer 570, Farmington, New Mexico 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1045' FSL & 1695' FWL

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) ☒ Casing Report

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐
☐
☐
☐
☒

5. LEASE

SE-077652

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

East

9. WELL NO.

10-M

10. FIELD OR WILDCAT NAME

Basin Dakota/Blanco Mesa Verde

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Section 26, T51N, R12W

12. COUNTY OR PARISH

San Juan

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDS, AND W.D.)

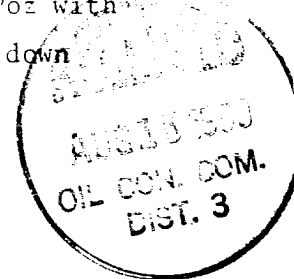
6069' GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

8-04-80 Ran 62 joints (2610') of 5-1/2", 15.5#, K-55 casing set from 4591'-7214'. Cemented with 250 sacks of Class "B" 50/50 Poz with 6% gel and 1/4# gel flake per sack and .6% Halad 9. Plug down at 2:30 A.M. 8-5-80.

WOCT...



Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED ACCEPTED FOR RECORD TITLE Dist. Prod. Mgr. DATE August 6, 1980

(This space for Federal or State office use)

APPROVED BY AUG 13 1980 TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

FARMINGTON DISTRICT

BY RW

NMOC