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OPERATOR		

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

NEW MEXICO OIL CONSERVATION COMMISSION

5a. Indicate Type of Lease
State ☐   Fee. [X]

5. State Oil & Gas Lease No.

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 "APPLICATION FOR PERMIT —" (FORM C-101) FOR SUCH PROPOSALS.)

1.
OIL WELL ☐   GAS WELL [X]   OTHER•

7. Unit Agreement Name

2. Name of Operator

Southland Royalty Company

8. Farm or Lease Name

Maddox

3. Address of Operator

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

9. Well No.

2

4. Location of Well

UNIT LETTER ___M___, 810 ___ FEET FROM THE ___south___ LINE AND ___1030___ FEET FROM

THE ___west___ LINE, SECTION ___10___ TOWNSHIP ___32N___ RANGE ___11W___ NMPM.

10. Field and Pool, or Wildcat

Blanco P. C. Ext.

15. Elevation *(Show whether DF, RT, GR, etc.)*

6448' GR

12. County

San Juan

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

TEMPORARILY ABANDON ☐
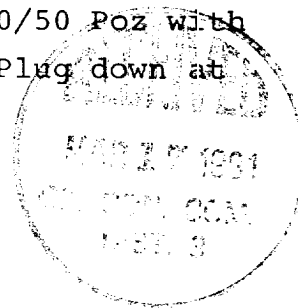
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐

CHANGE PLANS ☐

OTHER _____ ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

COMMENCE DRILLING OPNS. ☐

CASING TEST AND CEMENT JOB ☐

OTHER ___Casing Report___ [X]

ALTERING CASING ☐

PLUG AND ABANDONMENT ☐

17. Describe Proposed or Completed Operations *(Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work)* SEE RULE 1103.

3/14/81   Ran 114 joints (3343.63') of 2-7/8", 6.5#, J-55 casing set at
3356'. Cemented with 430 sacks of Class "B" 50/50 Poz with
6% gel, followed with 50 sacks of Class "B". Plug down at
3:15 P.M. 3-14-81. Top of cement at 1400'.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED _Esther J. Ferguson_   TITLE _Drilling Clerk_   DATE _March 16, 1981_

Original Signed by FRANK T. CHAVEZ
APPROVED BY _____   TITLE _SUPERVISOR DISTRICT #1_   DATE MAR 17 1981

CONDITIONS OF APPROVAL, IF ANY: