

Form 3160-5
(July 1989)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING
OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on reverse
side)

BLM Roswell District
Modified Form No.
NM060-3160-4

clsp

RECEIVED

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-" for such proposals.)

MAR - 5 1992

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR SOUTHLAND ROYALTY COMPANY		8. FARM OR LEASE NAME RJU TR 2A	
3. ADDRESS OF OPERATOR P.O. Box 51810, Midland, TX 79710-1810		9. WELL NO. 24	
3a. AREA CODE & PHONE NO. 915-688-6943		10. FIELD AND POOL, OR WILDCAT GRAYBURG-JACKSON 7R-Q-G-5A	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface A, 1295' FNL AND 1295' FEL		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC 35, T17S, R29E	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3555 GR	
		12. COUNTY OR PARISH EDDY	
		13. STATE NM	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) PUT ON PRODUCTION

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

X

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

2/12 TIH W/ BIT & SCRAPER TO 3055'.

2/13 TIH W/ 2" X 1 1/2" X 10' RHBC PUMP. SET 2 3/8" TBG @ 3163'. TURN TO PRODUCTION, on 2/13/92

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

SIGNED Bramm Scholz TITLE PRODUCTION ASSISTANT DATE 02/24/92

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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