

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLES
(Other instructions
reverse side)

E*
re

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-0384575

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Dale H. Parke B Tr. B

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Grayb Jackson (SR-Q-GB-SA)

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

15-17S-30E

12. COUNTY OR PARISH

Eddy

13. STATE

N.M.

1.

OIL WELL ☐ GAS WELL ☐ OTHER

Water injection well

2. NAME OF OPERATOR

Southland Royalty Company

RECEIVED

3. ADDRESS OF OPERATOR

1100 Wall Towers West

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)

At surface

330' FSL, 330' FWL, Sec. 15, 17S, 30E

O. C. D.

ARTESIA, OFFICE

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

GL 3673'

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other) Temporarily abandon

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SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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REPAIRING WELL

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☐

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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.)*

Southland Royalty Company respectfully requests that an exception to Rule 705A be granted for this well.

We are now developing the waterflood by infill drilling.

During 1979, we replaced the injection tubing and shut this well in.

Direct communication had been observed with the south offset.

There were no other producers in the area so the well was shut in.

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

SIGNED

J. H. Harkin

TITLE

District Production Mgr.

DATE

11-10-81

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side