OF COPIES RECEIVED	<u> </u>		_					Form (
DISTRIBUTION	3				c i	e m c iv	e i		edes Old and C-103	
SANTA FE	1.	\checkmark	NE	W MEXICO O	IL CONSE	RVATION COMMI	5 5 10h	Effect	ive 14-65	da1
FILE	1	4						172 123		deral
U.S.G.S.	1					MAR 22 197	9	4	te Type of Le	
LAND OFFICE								State	il 6 Gas Lea	Fee
OPERATOR	\Box					O. C. C.		1	29020 A	se no.
						ARTESIA, OFFIC	· 		TTTTT	m
(DO NOT USE THIS FO	RM FO	R PROP	OSALS TO DRILL	AND REPORT	OR PLUS BA	CK TO A DIFFERENT RI	ESERVOIR.			
I. OIL X GAS WELL WELL			OTHER+,	,		•		7. Unit Ac	preement Nam	e
2. Name of Operator			1/					8. Form o	Lease Name	,
Southland Royal	Lty (Com	any			•		Dale	H. Parke	"A" Tr.1
1. Address of Operator								9. Well No) .	
1100 Wall Tower	s W	est,	, Midland	, Texas	79701				2	
4. Location of Well	-				· · · · · ·			10. Field	and Pool, or	Wildcat
ORIT LETTER B		330	FEET	T FROM THE	north	LINE AND	310 PEET	Graybu	rg Jacks	on (O.F.SA
			20		3.56		_			
east east	.INE, S	ECTIO	· <u>22</u>	TOWNSHIP	17S	RANGE30E	<u></u> *	IMPM: (())		
		~~							11111111	HHHH
	III		15. 1	3698 DF	whether i	OF, RT, GR, etc.)		12. Count	. //	
ÄIIIIIIII	777	7777	7////					Eddy		77777777
15.	Che	ck A	ppropriate	Box To Inc	licate N	ature of Notice,	Report of	r Other Data		
NOTE	CE O	FIN	TENTION T	·O:	1		SUBSEQU	JENT REPOR	T OF:	
· 	_ ·	•					سينغ	•		_
PERFORM REMEDIAL WORK				PLUG AND ASA	*00*	REMEDIAL WORK			ALTERING CA	51NG
TEMPORARILY ASANOON]				!	COMMENCE DRILLING	OPNS.		PLUG AND AS	ANDONMENT
FELL OR ALTER CASING]			CHANGE PLANS		CASING TEST AND CE]		_
						GTHER Brad	enhead T	lie In	 	X
GTHER			 		—니	•				
17. Describe Proposed or Co	mniet	~ d One	enttions (Clear	ly state all ne	tinent deta	ils and give nertines	nt dates, incl	uding estimated	date of startin	s any proposed
work) SEE RULE 1103.	p.cc	Op		o, po.						e any property
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7	ried	Bra	denhead t	to surfac	e with	valve expose	đ.			
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12. I bereby certify that the	inform	etion	above is true :	and complete to	the best o	f my knowledge and	bellef.			_
a .1		D								
OKHED C. Harry	WI	MAN		•	Di	istrict Engin	eer	DATE	3-15-	79
· ·	//	,								

CONDITIONS OF APPROVAL, IF ANY: