Submit 3 Copies to Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources Department OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 886042086		Form C-103 Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240			WELL API NO. 30-015-26577
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease STATE X FEE
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	DEC 2 3 1991		6. State Oil & Gas Lease No. LG-9156
SUNDRY NOTICES AND REPORTS ON WELLS IN OFFICE (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.)			7. Lease Name or Unit Agreement Name Potash "16" State
1. Type of Well: OR GAS WELL X WELL	OTHER		Potasii io State
2. Name of Operator Southland Royalty Compan	y		8. Well No.
3. Address of Operator P.O. Box 51810, Midland, TX 79710-1810			9. Pool name or Wildcat (NOCD Hills 13-6-54) Leo (Queen, Grayburg)
4. Well Location Unit Letter B: 990 Feet From The North Line and 2310 Feet From The East Line			
Section 16 Township 18-S Range 30-E NMPM Eddy County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3501'GR			
11. Check . NOTICE OF INT	Appropriate Box to Indicate N FENTION TO:		eport, or Other Data SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DRILLING		
PULL OR ALTER CASING OTHER:		CASING TEST AND CO	EMENT JOB []
12. 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. PLUGGED AND ABANDONED			
SET 5-1/2" CMT RTNR AT 3120'. PUMPED 55 SXS CLASS C CMT, SQUEEZED BELOW RTNR W/ 50 SXS, DUMPED 5 SXS CMT ON TOP OF RTNR. PULLED TBG TO 3060, CIRC'D HOLE W/10 PPG GELLED MUD. SPOT 25 SXS CL C PLUG 2700'-2450'. SPOT 25 SXS CL C 1465'-1215'. PERF'D 8 HOLES 550'-551', PUMPED 150 SXS CL C CMT, CIRC'D 20 SXS TO PIT UP 5-1/2" ANNULUS. WELL P & A'D 8-15-91.			
			Post ID-2 1-18-92 P&A
I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Production Asst. DATE 12-18-91			
SKINI ORB		Production Asst	
TYPEOR PRINT NAME Maria L. Pere	Z /		TELEPHONE NO. 915-688-6906

This space for State Use)

ATTROVED BY Johnny Kellinson

DATE 11-23-92

CONDITIONS OF AFFIRD VAL, IF A

OK