ME DET CES. COMMISSION Drawer 1 UNITED STATES SUBMIT IN TRIPLICATE OF THE INTERIOR (Other instructions on reverse side) Form approved. Budget Bureau No. 42-R1424. Form 9-331 (May 1963) 5. LEASE DESIGNATION AND SERIAL NO. GEOLOGICAL SURVEY LC 058709A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME 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.) 7. UNIT AGREEMENT NAME OIL WE',L GAS WELL OTHER Water Injection NAME OF OPERATOR S. FARM OR LEASE NAME Southland Royalty Company Taylor unit ADDRESS OF OPERATOR 1100 Wall Towers West, Midland, TX 79701
LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*
See also space 17 below.) 10. FIELD AND POOL, OR WILDCAT 1980' FSL, 660' FWL, Sec. 12, T. 18 S., R. 31 E. At surface Shugart (Y, SR, O, G)
BEC., T., B., M., OR BLK. AND
SURVEY OR ABEA 11. SEC. Sec. 12. T. 18 S. R. 12. COUNTY OF PARISH 13. STATE 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 14. PERMIT NO. 3755' GR 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PULL OR ALTER CASING REPAIRING WELL WATER SHUT-OFF TEST WATER SHUT-OFF MULTIPLE COMPLETE FRACTURE TREATMENT ALTERING CASING FRACTURE TREAT SHOOTING OR ACIDIZING ABANDONMENT\* ABANDON\* SHOOT OR ACIDIZE CHANGE PLANS (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other) Set CIBP Per Division Rule 705A 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.)\* RECEIPED POH w/tb9 & pkr. Set CIBP @ 3150' JAN 27 1982 Load hole w/treated water. ARTESA ON 遵

OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

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

SIGNED TITLE DIST. Prod. Mgr.

(This space for Federal or Alfe BIRQUED)

(Org. Sgd.) PETER W. CHESTER

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

IAN 26 1982

FOR

JAMES A. GILLHAM\*See Instructions on Reverse Side

DISTRICT SUPERVISOR