

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT - " for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other

2. Name of Operator

SOUTHLAND ROYALTY COMPANY

3. Address and Telephone No.

P.O. Box 51810, Midland, TX 79710-1810 915-688-6943

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1880' FNL & 1980' FWL  
SEC. 27, T18S, R31E

NM OIL CONS COMMISSION  
Drawer 88216  
Artesia, NM 88216  
Budget No. 1004-0135  
Expires: March 31, 1993

5. Lease Designation and Serial No.

LC 029392B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

HINKLE 'F' NO. 1

9. API Well No.

30-015-05617

10. Field and Pool, or exploratory Area

SHUGART (Y,SR,QN,GB)

11. County or Parish, State

EDDY NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other REPAIR LEAK  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

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

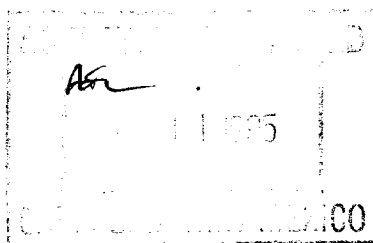
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Hole in tbg. Pulled out bad joint and replaced with new joint.

RECEIVED

JUL 14 1995

OIL CON. DIV.  
DIST. 2



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

Signed

Title

REGULATORY ASSISTANT

Date

6/7/95

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: