

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPI
(Other instructions
reverse side)

FE-
TC-

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-029387-C

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.)

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐ Water Injection Well

2. NAME OF OPERATOR

Southland Royalty Company

3. ADDRESS OF OPERATOR

1100 Wall Towers West Midland, Texas 79701

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

660 From North Line 1980 From East Line
Unit Letter B

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Shugart(APCO) A

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Shugart (Y-SR-Q-GB)

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

29-18S-31E

14. PERMIT NO.

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

DF3620

12. COUNTY OR PARISH

Eddy

13. STATE

N. Mex.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other)

(Other) Temporarily Abandon

(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 an excetion to Rule 705A for the subject well. This lease will be evaluated for future potential and waterflood patterns that could utilize this well.

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

SIGNED

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