

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

NM OIL & GAS COMMISSION
SUBMITTAL INSTRUCTIONS
(Other instructions on reverse side)
Artesia, NM 88210

Form approved.
Budget Bureau No. 42-R1424.

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		NOV 2 1982		5. LEASE DESIGNATION AND SERIAL NO. 71-029387-A	
2. NAME OF OPERATOR Southland Royalty Company		O. C. D.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 21 Desta Drive, Midland, Texas 79701		ARTESIA, OFFICE		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 330' FSL & 1650' FEL, Sec. 29, T-18-S, R-31-E				8. FARM OR LEASE NAME Shugart "A"	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, CR, etc.) Unknown		9. WELL NO. 3	
				10. FIELD AND POOL, OR WILDCAT Shugart (Y,SR,O,G)	
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 29, T-18-S, R-31-E	
				12. COUNTY OR PARISH Eddy	
				13. STATE N.M.	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Perf'd additional Yates Pay <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(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.) *

- MIRU PU. POH w/rods & tbg.
- Set retrievable B₄ @ 2610'.
- Spot 200 gals 15% NE acid.
- Perf's 1 JSPF @ 2574-81', 2560-64', 2546-54', 2524-28', 2510-17' & 2490-96' (42 holes Yates).
- Acidz'd perfs 2490-2581' w/4200 gals 15% NE acid.
- Swabbed.
- Frac perfs 2490-2581' w/18,000 gals gelled wtr, 46,000# 20/40 sd & 128,700 SCF N₂ in 2 stages.
- POH w/tbg & pkr. GIH w/tbg. Wash sand from 2580' to 2610'.
- RIH & retrieve RBP. RU to run logs. Ran Gamma Ray log.
- RIH w/2 3/8" tbg. Set @ 2650'. SN @ 2635'. Returned well to production.

RECEIVED
NOV 13 1982

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

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

SIGNED F. W. Glass TITLE District Operations Engineer DATE 8/11/82

(This space for Federal or State use)

ACCEPTED FOR RECORD
(ORIG. SGD.) DAVID R. GLASS
NOV 1 1982
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO
See Instructions on Reverse Side

APPROVED BY _____ DATE _____
CONDITIONS OF APPROVAL _____