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U.S.G.S.

LAND OFFICE

OPERATOR

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NEW MEXICO OIL CONSERVATION COMMISSION

NOV 1 1981

O. C. D.
ARTESIA, OFFICEForm C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease

State ☒Fee ☐

5. State Oil & Gas Lease No.

B-9646

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Water Injection Well</u>		7. Unit Agreement Name
2. Name of Operator <u>Southland Royalty Company</u>		8. Farm or Lease Name <u>Monterey State</u>
3. Address of Operator <u>1100 Wall Towers West Midland, Texas 79701</u>		9. Well No. <u>5</u>
4. Location of Well UNIT LETTER <u>0</u> <u>990</u> FEET FROM THE <u>South</u> LINE AND <u>2310</u> FEET FROM THE <u>East</u> LINE, SECTION <u>32</u> TOWNSHIP <u>18S</u> RANGE <u>31E</u> NMPM.		10. Field and Pool, or Wildcat <u>Shugart (Y-SR-Q-GB)</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>GL3575 GR</u>		12. County <u>Eddy</u>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:PERFORM REMEDIAL WORK ☐TEMPORARILY ABANDON ☒PULL OR ALTER CASING ☐OTHER ☐PLUG AND ABANDON ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐COMMENCE DRILLING OPNS. ☐CASING TEST AND CEMENT JOBS ☐OTHER ☐ALTERING CASING ☐PLUG AND ABANDONMENT ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

Southland Royalty Company respectfully requests an exception 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 information above is true and complete to the best of my knowledge and belief.

SIGNED

TITLE District Production ManagerDATE 11/6/81

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: