NO. OF COPIES RECEIVED		·	·		-	
DISTRIBUTION		Ţ			Form C-103 Supersedes Old	
		$\left  - \right $			C-102 and C-102	
SANTA FE			NEW MEXICO OIL CONSERV	VATION COMMISSION VE	Effective 1-1-65	
FILE	_/					
U.S.G.S.				NOV 27 1979	5a. Indicate Type of Lease	
LAND OFFICE				State XX Fee		
OPERATOR	1			#339	5. State Oil & Gas Lease No.	
				C. C. C.	L-6702	
(DO NOT USE THIS FOR USE *						
1.					7. Unit Agreement Name	
OIL GAS WELL WELL	XX		OTHER-			
2. Name of Operator					B. Farm or Lease Name	
Southland Roy	State "20" Comm					
3. Address of Operator	State "30" Comm					
1100 Wall Tow	er	Wes	t, Midland, Texas 79701		1 1	
4. Location of Well	10. Field and Pool, or Wildcath					
Т						
UNIT LETTER	·		80 FEET FROM THE South	LINE AND 2100 FEET FRO	M THEFT PROPERTY	
Fast			N 30 TOWNSHIP 19-S	29_5		
	* (////////////////////////////////////					
	12. County					
<i>ΔΠΠΠΠΠΠΠΠ</i>	///	())	3465 GR			
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Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:						
NOTIC	IT REPORT OF:					
<b>ل</b> ــــا	1			<u>ب</u>		
PERFORM REMEDIAL WORK	1			EMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON				OMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT	
PULL OR ALTER CASING	ļ		CHANGE PLANS	ASING TEST AND CEMENT JOB	(	
				OTHER	[_]	
OTHER			[]			
					<u> </u>	

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 1103.

This is to notify all parties that this well ceased production on 11-4-79. The well had declined to 50 MCFPD and the interval from 10906-10910 was acidized with 1000 gals 7 1/2% MS acid w/1000 SCF/bbl N<sub>2</sub>. After acidizing, the well swabbed 100% formation water. We propose to recomplete in the upper Morrow Sands as follows:

- 1. Rig up. Run CIBP and set @ 10880'. Cap with 35' of cement.
- Perforate the following intervals with 2 JSPF @ 10418-10426, 10500-10506, 10566-10570, 10604-10608, 10750-10754, 10782-10786, 10792-10796, 10824-10832.
- 3. Acidize and fracture stimulate if necessary.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED_C. Harney Can	TITLE District Engineer	DATE <u>11-26-79</u>
APPROVED BY U. a. Jussit	SUPERVISOR, DISTRICT I	NOV 2 8 1979
CONDITIONS OF APPROVAL, IF ANY:		