| | 21,212.0 | - | dile. | |
|---|---|--|--|--|
| DEPARTM | Jiv. TED STATES IENT OF THE INTER EOLOGICAL SURVEY | SUBMIT IN TRIPLACATE® (Other instructions on re- verse side) | Form approved. | |
| SUNDRY NOTION (Do not use this form for proposa Use "APPLICA" | CES AND REPORTS ls to drill or to deepen or plug TION FOR PERMIT—" for such | back to a different reservoir. proposals.) | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | |
| OIL GAS XX WELL OTHER | | RECEIVED | 7. UNIT AGREEMENT NAME | |
| 2. NAME OF OPERATOR Southland Royalty Comp 3. ADDRESS OF OPERATOR | pany | DEC 2 2 1980 | 8. FARM OR LEASE NAME 2/ Recos River Fed "21" Com | |
| 1100 Wall Towers Wes | t: Midland, Texas | 7970 P. C. D. | 9. WELL NO. | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State residence leads See also space 17 below.) At surface 1980' FSL & 2030' FWL Sec. 21, T-19-S, R-27-E | | | 10. FIELD AND POOL, OR WILDCAT Undesignated (Morrow) 11. SEC., T., R., M., OR BLK. AND SUEVEY OR AREA Sec 21, T-19-S, R-27-E | |
| 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, | | OF, RT, GR, etc.) | 12. COUNTY OR PARISH 13. STATE | |
| | 3466.9' GR | | Eddy New Mexico | |
| 16. Check App | propriate Box To Indicate I | Nature of Notice, Report, or C | Other Data | |
| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | | |
| FRACTURE TREAT M | CLL OR ALTER CASING ULTIPLE COMPLETE BANDON* HANGE PLANS | WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) Set 8 5/8 (NOTE: Report results Completion or Recompl | REPAIRING WELL ALTERING CASING ABANDONMENT* I Intermediate csq of multiple completion on Well etion Report and Log form.) | |
| 17. DESCRIBE PROPOSED OR COMPLETED OPER proposed work. If well is direction nent to this work.)* Dr1 11" hole to 2000'. Cmt w/525 sxs light we @ 3:40 AM 12-14-80. I | Ran 45 jts of 8 | nt details, and give pertinent dates, ations and measured and true vertice 5/8" 24#, J-55, ST&C C1 "C" w/2% CaCl. (| including estimated date of starting any all depths for all markers and zones perti- | |

RECEIVED

DEC 1 8 1980

U.S. GEULUGICAL SURVEY ARTESIA, NEW MEXICO

| 18. I hereby certify that | the foregoing is true and correct | | |
|---------------------------|--|--|----------|
| SIGNED | 7arson | TITLE District Operations EngineerDATE | 12-16-80 |
| (This space for Feder | al of State office use RECORD | | |
| APPROVED DV | PETER W. CHESTER | TITLE DATE | |
| CONDITIONS OF AP | PROVAL DECNY: 9 1980 | DATE | |
| | U.S. GEOLOGICAL SURVEY ROSWELL, NEW MEXICOR | Instructions on Reverse Side | - |