

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

- | | |
|---|---|
| 1. Type of Well
GAS | 5. Lease Number
SF-077874 |
| 2. Name of Operator
Southland Royalty Co | 6. If Indian, All.or
Tribe Name |
| 3. Address & Phone No. of Operator
Box 4289, Farmington, NM 87499 (505) 326-9700 | 7. Unit Agreement Name |
| 4. Location of Well, Footage, Sec, T, R, M.
1450'S, 790'W Sec.7, T-27-N, R-9-W, NMPM | 8. Well Name & Number
Hanks #5 |
| | 9. API Well No. |
| | 10. Field and Pool
Basin Fruitland Coal |
| | 11. County and State
San Juan County, NM |
12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA
- | Type of Submission | Type of Action |
|--|--|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion |
| <input type="checkbox"/> Final Abandonment | <input type="checkbox"/> Plugging Back |
| | <input type="checkbox"/> Casing Repair |
| | <input type="checkbox"/> Altering Casing |
| | <input type="checkbox"/> Other |
| | <input type="checkbox"/> Change of Plans |
| | <input type="checkbox"/> New Construction |
| | <input type="checkbox"/> Non-Routine Fracturing |
| | <input type="checkbox"/> Water Shut Off |
| | <input type="checkbox"/> Conversion to Injection |

13. Describe Proposed or Completed Operations

The top of the Pictured Cliffs formation, according to modern log interpretation should be at 2096'. Please correct the well completion log with this change.

RESERVED
JAN 13 1991
OIL CON. DIV.
DIST. 3

14. I hereby certify that the foregoing is true and correct
Signed [Signature] Title Regulatory Affairs Date 12-6-90
ACCEPTED FOR RECORD

(This space for Federal or State office use)

DEC 28 1990

APPROVED BY _____
CONDITION OF APPROVAL, IF ANY:

TITLE

FARMINGTON RESOURCE AREA

BY

DATE

ENCLOSURE