16.

UNITED STATES SUBMIT IN TRIPLICATE* DEPARTMENT OF THE INTERIOR (Other instructions on reverse side)

GEOLOGICAL SURVEY

Form approved. Budget Bureau No. 42-B1424. 5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SF-080382-A

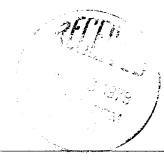
SUNDRY NOTICES AND REPORTS ON WEL	SUNDRY	NOTICES	AND	REPORTS	ON	WELLS
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OIL GAS WELL X OTHER 2. NAME OF OPERATOR 8. FARM	
WE'L LI WELL LX OTHER 2. NAME OF OPERATOR Southland Royalty Company From 3. ADDRESS OF OPERATOR 9. WELL	GREEMENT NAME
Southland Royalty Company 5. ADDRESS OF OPERATOR 9. WELL	
3. ADDRESS OF OPERATOR 9. WELL	OR LEASE NAME
o. Abbando of Granton	tier "C"
P. O. Drawer 570, Farmington, New Mexico 87401 #2	NO.
To the Edward Color Terraing Color Terrain Color Terrain Color Col	
See also space 17 below.) Basi	n Dakota n Dakota signated Gallup
	T., R., M., OR BLK. AND RVEY OR AREA
Sect	ion 5, T27N, R11W
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 12. COUN	TY OR PARISE 13. STATE
6126' KB San	Juan New Mexi

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

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF;				
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE		PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON*		WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING		REPAIRING WELL ALTERING CASING ABANDONMENT*	
REPAIR WELL (Other) Repair t	ubing	change plans leak		(Other)(Note: Report res Completion or Reco	ults of multiple mpletion Repor	completion on Wel t 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.)*
 - 1. MIRU.
 - 2. Pull and lay down rods and tubing on Gallup side. (Rotate to the right 10+ turns to get out of tubing anchor)
 - 3. Pull Dakota tubing and replace bad joints. (Rotate to the right 10+ turns to get out of Model "D" Packer.)
 - 4. Rerun Dakota tubing without parallel string anchor. (Hydrotest.)
 - Sting into Model "D" and swab test Dakota zone. 5.
 - 6. Rig down.



18. I hereby certify that the foregoing is true and correct SIGNED	TITLE District Production Manager	DATE January 23, 1978
(This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE
		DECEN

RECEIVED

JAN 24 1978

