TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL

PULL OR ALTER CASING

MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other)

UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

Dec. 1973	Budget Bureau No. 42-R1424
UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	5. LÉASE 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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 Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME
1. oil gas XX other 2. NAME OF OPERATOR	Hanks 9. WELL NO.
Southland Royalty Company 3. ADDRESS OF OPERATOR P.O. Drawer 570, Farmington, New Mexico	12-E 10. FIELD OR WILDCAT NAME Basin Dakota 11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 1020' FSL & 725' FEL AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	AREA Section 7, T27N, R9W 12. COUNTY OR PARISH 13. STATE
	San Juan New Mexico 14. API NO.
REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	15. ELEVATIONS (SHOW DF, KDB, AND WD) 6487 GR

(NOTE: Report results of multiple completion or zone

change on Form 9-330.)

BY_

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.)*

"Re-seeding has been completed as per stipulations."

Subsurface Safety Valve: Manu. and Ty	pe	and the state of t
18. I hereby certify that the foregoing i	s true and correct TITLE Dist. Engineer	DATE February 8, 1982
	(This space for Federal or State office use	
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE SECREPTED FOR MECOND
		FEB 12 1982
	*See Instructions on Reverse Side	FARMINGTON PISTRICT

NMOCC