

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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.)

1. oil ☐ gas ☒ other ☐
well well
2. NAME OF OPERATOR
Southland Royalty Company
3. ADDRESS OF OPERATOR
P.O. Drawer 570, Farmington, N.M. 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 910' FNL & 1060' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

5. LEASE
SF-075794
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Hughes
9. WELL NO.
2-E
10. FIELD OR WILDCAT NAME
Basin Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 23, T28N, R11W
12. COUNTY OR PARISH | 13. STATE
San Juan | New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
5774' GR

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐ ☐

FRACTURE TREAT ☐ ☐

SHOOT OR ACIDIZE ☐ ☐

REPAIR WELL ☐ ☐

PULL OR ALTER CASING ☐ ☐

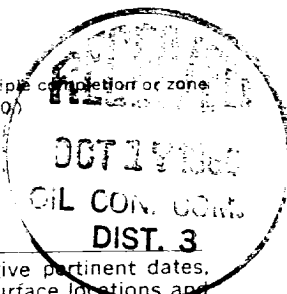
MULTIPLE COMPLETE ☐ ☐

CHANGE ZONES ☐ ☐

ABANDON* ☐ ☐

(other) Casing Report ☒

(NOTE: Report results of multiple completion or zone change on Form 9-330)



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.)*

10/09/80 Ran 157 joints (6450') of 4-1/2", 10.5#, K-55 casing set at 6455'.
DV tools at 4475' and 1846'.

Cemented as follows:

- 1st Stage: with 175 sacks of 50/50 Poz with 1/4# gel flake per sack and 6% gel, followed with 50 sacks of Class "B" neat with 1/4# gel flake per sack and 2% CaCl₂. Plug down at 9:30 P.M. 10-09-80.
- 2nd Stage: with 395 sacks of 50/50 Poz with 1/4# gel flake per sack and 6% gel. Plug down at 1:15 A.M. 10-10-80.
- 3rd Stage: with 425 sacks of 50/50 Poz with 6% gel. Plug down at 3:45 A.M. 10-10-80.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED [Signature] TITLE Dist. Prod. Mgr. DATE October 10, 1980

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

BY [Signature] *See Instructions on Reverse Side