Form 9–331
Dec. 1973

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 well ☐   gas well ☒   other

2. NAME OF OPERATOR
Southland Royalty Company

3. ADDRESS OF OPERATOR
P.O. Drawer 570, Farmington, NM   87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 790' FSL & 1770' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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) Perforation & Stimulation ☒

Form Approved.
Budget Bureau No. 42–R1424

5. LEASE
NM-03179

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Aztec

9. WELL NO.
#9

10. FIELD OR WILDCAT NAME
Kutz Fruitland

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 14, T28N, R11W

12. COUNTY OR PARISH | 13. STATE
San Juan | New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
5698' GL

NOTE: Report results of multiple completion or zone change on Form 9–330.)

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FARMINGTON RESOURCE AREA

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.)*

11-17-83 Pressure tested casing to 3500#. Perforated the Fruitland at 1470', 1473', 1478', 1482'. Total of four holes. Frac'd with 20,178 gallons of frac fluid & 15,000# 20/40 sand. ATP 1900 psi, AIR 12 BPM, ISIP 700 psi.

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CON. DIV.
DIST. 3

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

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

SIGNED _____ TITLE Secretary-Clerk DATE November 21, 1983

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

*See Instructions on Reverse Side

NMOCC

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FARMINGTON RESOURCE AREA

BY _____