

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		88 APR 18 AM 9:05	
2. NAME OF OPERATOR Southland Royalty Company		FARMINGTON RESOURCE AREA FARMINGTON, NEW MEXICO	
3. ADDRESS OF OPERATOR Post Office Box 4289, Farmington, NM 87499		8. FARM OR LEASE NAME Harrison	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1345'S, 2055'W		9. WELL NO. 100	
14. PERMIT NO.		15. ELEVATIONS (Show whether OF, RT, GR, etc.) 5966'GL	
		10. FIELD AND POOL, OR WILDCAT Undes. Fruitland	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 31, T-32-N, R-10-W N.M.P.M.	
		12. COUNTY OR PARISH San Juan	13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/> Spud Well	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report 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.)*

04-15-88 Spudded well at 5:15 a.m. 04-15-88. Drilled to 219'. Ran 5 jts. 9 5/8", 32.3#, H-40 surface casing set at 219'. Cemented with 110 sks. Class "B" with 1/4#/sk. gel-flake and 3% calcium chloride (130 cu.ft.). Circulated to surface. WOC 12 hours. Tested 600#/30 minutes, held ok.

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

SIGNED

TITLE Drilling Clerk

DATE

04-16-88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side