

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Southland Royalty Company	8. FARM OR LEASE NAME Burnt Mesa
3. ADDRESS OF OPERATOR Post Office Box 4289, Farmington, NM 87499	9. WELL NO. 101
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1175'S, 1500'W	10. FIELD AND POOL, OR WILDCAT Undes. Fruitland Coal
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 25, T-32-N, R-07-W N.M.P.M.
15. ELEVATIONS (Show whether DP, ST, GR, etc.) 6602' GL	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:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

Spud Well

(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.)*

07-22-88 Spudded well at 12:00 pm 07-22-88. Drilled to 227'. Ran 5 jts. 9 5/8", 36.0#, K-55 surface casing set at 227'. Cemented with 150 sks. Class "B" with 1/4#/sk. gel-flake and 3% calcium chloride (174 cu.ft.). Circulated to surface. WOC 12 hrs. Tested 600#/30 minutes, held ok.

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

SIGNED

Regulatory Affairs

TITLE

Regulatory Affairs

DATE

07-28-88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NR00CC

*See Instructions on Reverse Side