

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well GAS	5. Lease Number NM-9037
2. Name of Operator SOUTHLAND ROYALTY	6. If Indian, All. or Tribe Name
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700	7. Unit Agreement Name
4. Location of Well, Footage, Sec., T, R, M 840'FNL, 1465'FEL Sec.12, T-32-N, R-8-W, NMPM	8. Well Name & Number Reese Mesa #104
	9. API Well No. 30-045-26976
	10. Field and Pool Fruitland Coal
	11. County and State San Juan Co, NM

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

Type of Submission	Type of Action
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other -
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Conversion to Injunctio

13. Describe Proposed or Completed Operations

This well is a non-commercial well. Due to our successful recavitation program, this well is currently being evaluated as a potential recavitation candidate.

RECEIVED
JUN 2 7 1994
OIL CON. DIV.
DIST. 3

070 FARMINGTON, NM
JUN 17 PM 1:58

RECEIVED
SEN

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

Signed [Signature] (JAS6) title Regulatory Affairs Date 6/16/94

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____
CONDITION OF APPROVAL, if any:

APPROVED
JUN 23 1994
DISTRICT MANAGER