Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT

OIL CONSERVATION DIVISION

1	er in	C·1	los	
1	Revie	d 1	-1-	85

F.O. BOK 1980, HODDE, NM SEZAU	P.O. Box 2088
P.O. Diewer DD, Artelia, NM 88210	Iew Mexico 87504-2088 5. Indicate Type of Lease STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPOR (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OF DIFFERENT RESERVOIR. USE "APPLICA (FORM C-101) FOR SUCH PROP 1. Type of Well:	R TO DEEPEN OR PLUG BACK TO A 7. Lease Name 1) it greatly posals.)
	Maddox Wall 6 1989
2. Name of Operator Southland Royalty Com	
3. Address of Operator PO Box 4289, Farmingt	on, NM 87499 9. Pool name or Wildcat DIST. 3 Basin Fruitland Coal
4. Well Location Unit Letter : 790 Feet From The So	uth Line and 1330 Feet From The West Line
Section 14 Township 32	N Range 11W NMPM San Juan County (Show whether DF, RKB, RT, GR, etc.)
V/////////////////////////////////////	10'GL
11. Check Appropriate Box to NOTICE OF INTENTION TO:	to Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABAN	NDON REMEDIAL WORK ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING OPNS. E PLUG AND ABANDONMENT
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB
OTHER:	OTHER:
12. Describe Proposed or Completed Operations (Clearly state all per work) SEE RULE 1103.	rtinent details, and give pertinent dates, including estimated date of starting any proposed
Jts. 9 5/8", Cemented with 3% calcium ch	at 5:00 pm 05-09-89. Drilled to 251'. Ran 5 36.0#, K-55 surface casing set at 251'. 150 sks. Class "B" with 1/4#/sk. gel-flake an loride (173 cu.ft.) circulated to surface. WO ed 600#/30 minutes, held ok.
with 6% gel, cu.ft.) follow	n 63 jts. 7", 20.0#, K-55 intermediate casing, 744'. Cemented with 400 sks. Class "B" 65/35 2% calcium chloride, 1/2 cu.ft. perlite/sx (80 wed by 100 sks. Class "B" with 2% calcium cu.ft.) circulated to surface. WOC 12 hours. min.
I hereby cartify that the information above to true and complete to the best of m	
SIGNATURE SEGGY DRAUBTUCE	me Regulatory Affairs DATE 5-15-89
TYPE OR PRINT NAME	TELEPHONE NO.
Original Signed by FRANK T. CHAVEZ APPROVED BY CONDITIONS OF APPROVAL, E ANY:	SUPERVISOR DISTRICT # 3 MAY 1 6 1989