		Form C-133
NO. OF COPIES RECEIVED	- 7	Supersedes GH
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Eliceti's felop
FILE	1,1	a, Indicate Type of Lease
U.S.G.S.		State Fee X
LAND OFFICE	 	State Oil & Gas Lease No.
OPERATOR		
	THE PERSON OF TH	
(DO NOT USE THIS FO	SUNDRY NOTICES AND REPORTS ON WELLS ORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. "MAPPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
USE	"APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPUSALS.	/. Unit Agreement Name
1	L X OTHER-	
WELL WELL J. Name of Speritor	t Can Office	3, Farm or Lease Name
Southland Royal	tu Companu	Lawson Federal
3. Address of Operator		9. Well No.
	70, Farmington, New Mexico	#1-A
4. Location of Well		10. Field and Pool, or Wildcat
A	900 FEET FROM THE North LINE AND 930 FEET FROM	Blanco Mesa Verde
UNIT ZETENA		
East	LINE, SECTION 31 TOWNSHIP 32N RANGE 11W NMPM.	
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	6490	San Juan
1.	Check Appropriate Box To Indicate Nature of Notice, Report or Other	r Data
NOTI	ICE OF INTENTION TO: SUBSEQUENT	REPORT OF:
		_
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	Casing Poport [7
	OTHER Spud &	Casing Report X
OTHER		
1" Pressine Proposed or C	completed Operations (Clearly state all pertinent details, and give pertinent dates, including e	stimated date of starting any propose
work) SEE RULE 1103.	•	
3-12-78	Spudded 12-1/4" surface hole at 11:00 PM to a TD 248'.	Ran 5 joints of
	9-5/8", 36#, K-55 casing. Set at 242'. Cemented with	110 sacks Class "B"
	with 1/4# gel flake per sack and 3% CaCl. Cement circ	. to surface.
	Plug down at 6:30 AM 3-13-78.	
		220
15. I hereby certify that the	e information above is true and complete to the best of my knowledge and belief.	
	Z / Win / TITLE District Production Manager	DATE March 13, 1978
SIGNED		
Omiginal Sig	med by A. R. Kendrick SUPERVISOR DIST. #3	MAS 1 179
OLIBITIAL PIE		DATE

CONDITIONS OF APPROVAL, IF ANY: