

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R/424.

5. LEASE DESIGNATION AND SERIAL NO.

SF-078118

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Lawson

9. WELL NO.

#4

10. FIELD AND POOL, OR WILDCAT

Undes. Fruitland

Blanco Pictured Cliffs

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Section 31-32N-11W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

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 ☐ GAS ☒
WELL WELL OTHER

2. NAME OF OPERATOR

Southland Royalty Company

3. ADDRESS OF OPERATOR

P. O. Drawer 570, Farmington, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)

At surface

820' FNL & 810' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6467' GR

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Casing reportREPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐☒(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.)*

4-22-79 TD 3279'. Ran 100 jts of 2-7/8", 6.5#, J-55 tubing, set at 3049' (Frt).
Ran 108 jts of 2-7/8", 6.5#, J-55 tubing, set at 3272' (PC).
Cemented with 410 sxs of Class B Poz with 6% gel followed by 120 sxs of
Class B Neat with 1/4 cu. ft. fine gilsonite per sack.
Plug down at 3:30 PM, 4-22-79

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

SIGNED

TITLE

District Production Manager

DATE

April 23, 1979

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

TMMOC