

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

C/SF

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back a well or to construct a reservoir. Use "APPLICATION FOR PERMIT" for such proposals.)

RECEIVED
JAN 18 1983
ARTESIA NM 88210
RECEIVED
SEP 30 1982

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR: Southland Royalty Company, ARTESIA OFFICE

3. ADDRESS OF OPERATOR: 21 Desta Drive, Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
330' FSL & 1650' FWL, Sec. 33, T-18-S, R-31-E

5. LEASE DESIGNATION AND SERIAL NO.: NM-12211

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME: Shugart "B"

9. WELL NO.: 3

10. FIELD AND POOL, OR WILDCAT: Shugart (Y,SR,Q,G)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 33, T-18-S, R-31-E

12. COUNTY OR PARISH: Eddy

13. STATE: N.M.

14. PERMIT NO.

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

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(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.)*

- MIRU PU. POOH w/rods & pump. Tag bottom w/tbg @ 3470'.
- RU Schlumberger & RIH w/NGT tool to 3310' & could not go further. POOH. RIH w/4 3/4" bit to 3470'. Ran log tool to 3470'. Ran NGT-CNL logs.
- RIH w/60' tailpipe on pkr & spot control valve to 3280'. Spot acid. Set pkr & let acid soak 1 hr. Pmpd 500 gal 15% HCL acid w/NEFE additives. Fished spot valve. Swab back load. POH w/pkr. Ran tbg & rods.
- Return to pumping.

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

SIGNED: Frey Raul TITLE: District Operations Engineer DATE: 9-29-82

(This space for Federal or State office use)

APPROVED BY: (Orig. Sec.) PETER W. CHESTER TITLE: _____ DATE: _____

CONDITIONS OF APPROVAL, IF ANY: _____

JAN 17 1983