## HOBBS' NEM WEXIC. 88340 P.O. BOX 1980 M'W' DIF CONS' COWWISSION

Form 3160-5 (June 1990)

1. Type of Well X Oil Well

12.

## UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

CHANDY NOTICES AND DEDODES ON WELLS

FORM	1 APPR	OVED
Budget Bur	cau No.	1004-0135
Expires:	March	31, 1993

	Expires:						
Lease	Designat	ioa	and	Ser	iel	No.	

LC 064944

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  Use "APPLICATION FOR PERMIT—" for such proposals	6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE	7. If Unit or CA, Agreement Design

7	. If U	nit or	CA,	Agreement	Designation
8.	Well	Name	and	No. FEDI	ERAL M
#	1				

2. Name of Operator SOUTHLAND ROYALTY COMPANY 3. Address and Telephone No.

30-025-<del>21895</del> 10. Field and Pool, or Exploratory Area

P.O. Box 51810 Midland, TX 79710 Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FSL & 990' FWL

SOUTH CORBIN WOLFCAMP

SEC. 27, T18S, R33E

11. County or Parish, State LEA COUNTY, NM

9. API Well No.

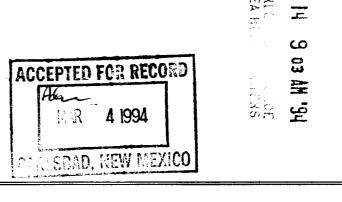
915-688-6943

TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Abandonment	Change of Plans
	Recompletion	New Construction
X Subsequent Report	Plugging Back	Non-Routine Fracturing
	Casing Repair	Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection
	X Other REQUEST CORRECTION OF	_ Dispose Water
	API NUMBER	(Note: Report results of multiple completion on Well

CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

13. 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.)\*

ACCORDING THE OIL CONSERVATION DIVISION, THE API NUMBER FOR THE ABOVE REFERENCED WELL HAS BEEN REPORTED INCORRECTLY. THE CORRECT NUMBER IS: 30-025-21895. PLEASE UPDATE YOUR RECORDS TO REFLECT THIS CORRECTION.



	ONALSBAD, NEW MEXI	<u>CO</u>	
14. I hereby qertify that the foregoing is true and correct Signed  DONNA WILLIAMS	Title PRODUCTION ASSISTANT	Date 2/10/94	_
(This space for Federal or State office use)		_	_
Approved by Conditions of approval, if any:	Title	Date	_

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.