

N. M. OIL & GAS  
P. O. BOX 1000  
UNITED STATES DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Form approved.  
Budget Bureau No. 42-R1424.

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 WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM-0997
2. NAME OF OPERATOR Southland Royalty Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 21 Desta Drive, Midland, Texas 79701	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL & 660' FWL, Sec. 21, T-18-S, R-33-E	8. FARM OR LEASE NAME Federal "21" Com.
14. PERMIT NO.	9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3830' GR	10. FIELD AND POOL, OR WILDCAT South Corbin (Bone Springs)
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 21, T-18-S, R-33-E
	12. COUNTY OR PARISH Lea
	13. STATE N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

<input type="checkbox"/>
<input type="checkbox"/>
<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.)\*

1. MIRUPU. Instl BOP.
2. Swb well dwn. Measure oil & wtr volume & beginning fluid level.
3. If no oil present, RDPU. If oil is produced, proceed w/next step.
4. POH w/tbg. RIH w/pkr & set @ 8900' +. Open pkr by-pass & spot acid to pkr. Close by-pass & acdz pfs 9030-52' w/4000 gals 15% HCl w/NEFE w/500 SCF/bbl of nitrogen @ 4 PBM diverting w/30 + BS.
5. Immediately flw & swb load back. RIH w/tbg as before.
6. RIH w/rods & place well on pmp.
7. Test & evaluate for additional stimulation.

RECEIVED

MAR 30 1983

OIL & GAS  
MINERALS MGMT. SERVICE  
ROSWEEL, NEW MEXICO

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

SIGNED

*Enlar*

TITLE District Operations Engineer DATE 3/30/83

(This space for Federal or State use)

APPROVED

(Orig. Sign.) PETER W. CHESTER

APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

MAR 30 1983

FOR

JAMES A. GILLHAM\*See Instructions on Reverse Side  
DISTRICT SUPERVISOR

RECEIVED  
APR 1 1983  
O.C.D.  
HORBS OFFICE