

N. M. OIL GASES COMMISSION  
UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRI  
(Other instruction  
reverse side)

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Form approved  
Budget Bureau No. 1004-015  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-26692

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Huber "17" Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

S. Corbin (Wolfcamp)

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

Sec. 17, T-18-S, R-33-E

12. COUNTY OR PARISH 13. STATE

Lea

N.M.

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Southland Royalty Company

3. ADDRESS OF OPERATOR

21 Desta Drive, Midland, Texas 79705

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

660' FSL & 660' FWL, Sec. 17, T-18-S, R-33-E

14. PERMIT NO.

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

3849.4' 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 COMPLETION ☐

ABANDON\* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) Set 13 3/8" csg ☒

REPAIRING 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.)\*

Spudded 17 1/2" hole 10-2-85. Drld to 358'. Set 13 3/8" 48# csg @ 358' w/400 sx C1 "C". PD @ 6:30 AM. Circ 145 sxs. WOC 18 hrs. Tested csg & BOP to 1000#. Held OK.

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

SIGNED

*John Stark*

TITLE

Operations Engineer

DATE

10/4/85

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

*[Signature]*

TITLE

DATE

OCT 11 1985

\*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO

RECEIVED

OCT 15 1985

O.C.D.  
HOBES OFFICE