

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
NEW MEXICO 89240

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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-93	
2. NAME OF OPERATOR Southland Royalty Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 21 Desta Drive, Midland, Texas 79705		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 660' FNL & 1980' FEL Sec. 18, T-18-S, R-35-E		8. FARM OR LEASE NAME West Corbin Federal	
14. PERMIT NO.		9. WELL NO. 12	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3860' GR		10. FIELD AND POOL, OR WILDCAT	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 18, T-18-S, R-35-E	
		12. COUNTY OR PARISH Lea	
		13. STATE NM	

18. 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 type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>cmt 13 3/8" csg & 8 5/8" csg</u> <input checked="" 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.)*

13 3/8" csg - Set @ 374'. Cmt'd w/375 sxs Class "C" + 2% CaCl₂ + 1/4 #/ sx Cello Flake. Plug down @ 10:34 a.m. 4/20/89. Circ. 165 sx to pit.

8 5/8 csg - Set @ 2900'. Cmt: Lead w/1550 sx pacesetter lite "C". Tail w/300 sx Class "C" + 2% CaCl₂. Circ. 715 sx to surface. Bumped plug @ 2:00 a.m. on 4/23/89

RECEIVED

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

SIGNED Robert L. Bradshaw TITLE Sr. Staff Env/Reg Spec. DATE 4/24/89

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: _____

MAY 4 1989

*See Instructions on Reverse Side

SJS
CARLSBAD, NEW MEXICO