

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVED
OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on reverse
side)

BLM Roswell District
Modified Form No.
NM060-3160-4

5. LEASE DESIGNATION AND SERIAL NO.
LC-069420

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Southland Royalty Company		8. FARM OR LEASE NAME West Corbin Federal	
3. ADDRESS OF OPERATOR P.O. Box 51810, Midland, TX 79710-1810	3a. AREA CODE & PHONE NO. 915-686-5600	9. WELL NO. 29	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL & 910' FEL		10. FIELD AND POOL, OR WILDCAT South Corbin (Wolfcamp)	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 7, T18S, R33E	
14. PERMIT NO. 30-025-31238	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3945.1' GR.	12. COUNTY OR PARISH Lea	13. STATE NM

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"/>	FULL 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 checked="" type="checkbox"/>	(Other) <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.)*

The attached plat shows the correct location for this well. The previous plat which was sent directly to the BLM by John West Engineering is incorrect. The correct location is:
660' FNL & 910' FEL, Sec. 7, T18S, R33E.

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

SIGNED

Ralph L. Bradshaw

TITLE

Sr. Staff Environmental Rep.

DATE

10 May 1991

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

***See Instructions on Reverse Side**

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator Southland Royalty Company			Lease West Corbin Federal		Well No. 29
Unit Letter A	Section 7	Township 18 South	Range 33 East	County Lea	NMPM

Actual Footage Location of Well:

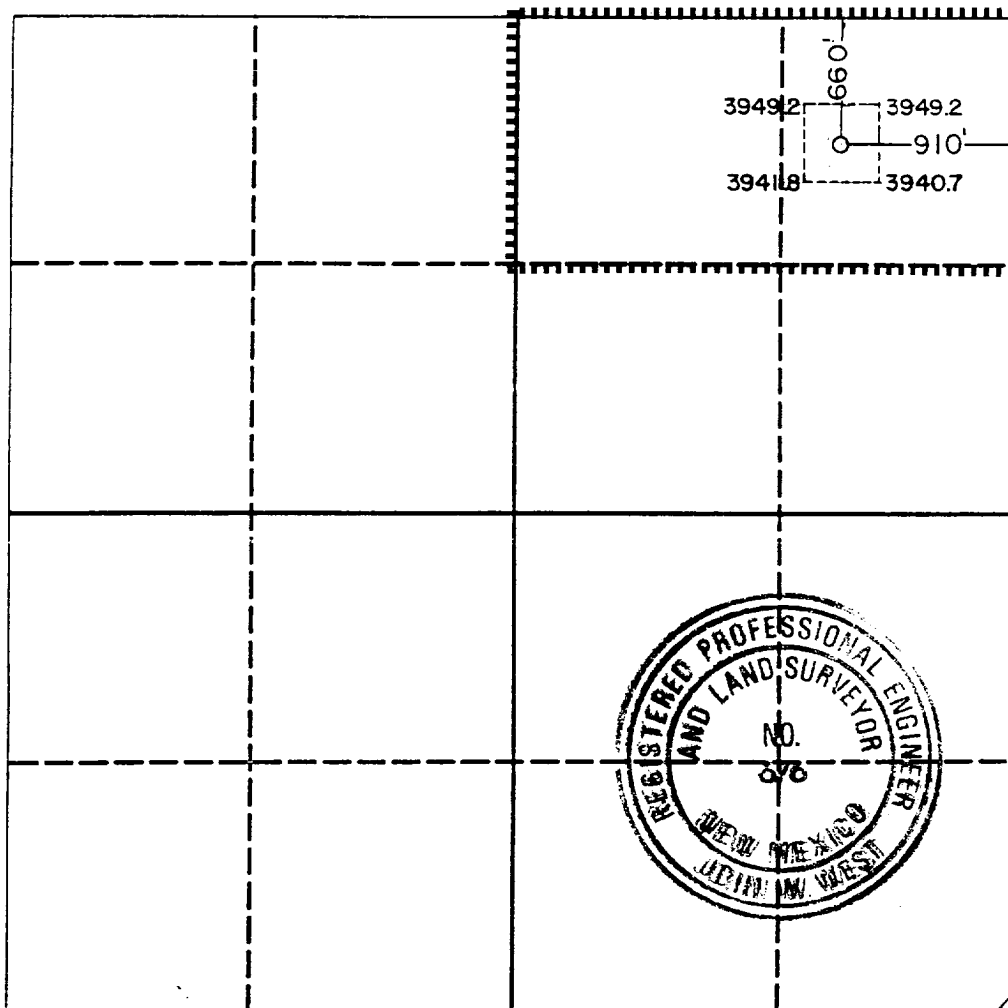
660 feet from the North line and 910 feet from the East line

Ground level Elev. 3945.1	Producing Formation Wolfcamp	Pool South Corbin	Dedicated Acreage: 80 Acres
------------------------------	---------------------------------	----------------------	--------------------------------

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consociated by communitization, unitization, force-pooling, etc.?

☐ Yes ☐ No If answer is "yes" type of consolidation _____
If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Signature _____

Robert L. Brasslaw

Printed Name _____

Robert L. BradshawSr. Env. Rep

Position

Meridian Oil Inc.

Company

5/10/91

Date _____

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed _____

March 29, 1991

Signature & Seal of
Professional Surveyor

Ch. West

Certificate No. JOHN W. WEST. 676

RONALD J. EIDSON. 3239

Amended Plat