

N. M. OIL CONS. COMMISSION  
P. O. BOX 1980  
HOBBS, NEW MEXICO 88240  
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.)

<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR <u>Southland Royalty Company</u></p> <p>3. ADDRESS OF OPERATOR <u>21 Desta Drive, Midland, Texas 79705</u></p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <u>660' FSL &amp; 1980' FEL, Sec. 21, T-24-S, R-34-E</u></p>	<p>5. LEASE DESIGNATION AND SERIAL NO. <u>NM 20980</u></p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME <u>Vaca Ridge "21" Federal Com.</u></p> <p>9. WELL NO. <u>1</u></p> <p>10. FIELD AND POOL, OR WILDCAT <u>Pitchfork Ranch (Morrow)</u></p> <p>11. SEC. T., S., M., OR BLK. AND SURVEY OR AREA <u>Sec. 21, T-24-S, R-34-E</u></p> <p>12. COUNTY OR PARISH <u>Lea</u></p> <p>13. STATE <u>N.M.</u></p>
<p>14. PERMIT NO.</p>	<p>15. ELEVATIONS (Show whether DF, RT, OR, etc.) <u>3500.5' GR</u></p>

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"/>	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>Set 13 3/4" Surface 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.)\*

Spudded well @ 9:30 AM 3/25/84. Drld 17 1/2" hole to 600'. Set 13 3/4" csg @ 600'. Cmt'd w/290 sxs C1 "C" Lite followed by 200 sxs C1 "C". PD @ 6:20 PM 3/25/84. Circ 100 sxs.



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

<p>SIGNED <u>Danell Roberts</u></p>	<p>TITLE <u>Operations Engineer</u></p>	<p>DATE <u>3/27/84</u></p>
<p>(This space for Federal or State Office Use)</p>		
<p>APPROVED BY <u>PETER W. CHESTER</u></p> <p>CONDITIONS OF APPROVAL, IF ANY: <u>APR 9 1984</u></p>	<p>TITLE _____</p>	<p>DATE _____</p>

\*See Instructions on Reverse Side

RECEIVED

APR 12 1984

O.C.F.  
HOBBS OFFICE