Submit 3 Copies

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico

Form	C-	10	3
Revise	ed	1-1	-81

to Appropriate District Office	Energy, Minerals and Natural	Resources Department		Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO. 30 - 015 - 29477 5. Indicate Type of Lease	
DISTRICT II P.O. Drawes DD, Artesia, NM 88210				
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Leas	STATE FEE X
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" (FORM C-101) FOR SUCH PROPOSALS.)		7. Lease Name or Unit Weems	Agreement Name .	
1. Type of Well: OIL WELL X WELL	OTHER			
2. Name of Operator Santa Fe Energy Resour	cos Inc		8. Well No.	
3. Address of Operator 550 W. Texas, Suite 13:			9. Pool name or Wildca	ranza Delaware
4. Well Location Unit Letter F : 203	37 Feet From The North	Line and 19	101 Feet From The	West Line
Section 27	Township 22S R	ange 27E	имрм Edo	dV County
	10. Elevation (Show wheth		c.)	
NOTICE OF I	ppropriate Box to Indicate NTENTION TO:	1	SEQUENT RE	
PERFORM REMEDIAL WORK L	PLUG AND ABANDON L	COMMENCE DRILLING		AND ABANDONMENT
PULL OR ALTER CASING	5,	CASING TEST AND CE	□▼ 1	
OTHER:		OTHER:		
12. Describe Proposed or Completed Opwork) SEE RULE 1103.	erations (Clearly state all pertinent det	tails, and give pertinent da	tes, including estimated da	ate of starting any proposed
set at 2100'. RU BJ ar	at 2100'. RU casing cr nd cemented casing w/ 4 ail w/ 200 sx Cl "C" + 3	00 sx 50/50 Poz	containing 10%	ígel, 5% salt, ar
PU DC's TIH. Test BOP	ril, cut casing off, we to 1500 psi, ok. Testo nt shoe. Drilling form	ed casing to 10	st weld to 600 00 psi, ok. WO	psi, ok. NU BOP. C total of 18
Thorphocognic best information to the control of th	Due and complete to the heart of control of	and belief		
I hereby certify that the information above is	true and complete to the best of myknowledge Mc Whough TIT.	e and belief. LE <u>Sr. Productio</u>	n_Clerk	DATE <u>05/14/97</u>
TYPE OR PRINT NAME Terry McCul				HONE NO.915/687-3551
(This space for State Use)	(ED MY TIM W. GORT			MAY 97 1007