

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPLICATE*
(Other Instruct' on re-
verse side)

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

5. LEASE DESIGNATION AND SERIAL NO

NM-04591

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

New Mexico Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat Delaware

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

Sec. 24, T-18S, R-33E

12. COUNTY OR PARISH

Lea

13. STATE

NM

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.)

RECEIVED
Aug 30 10 19 AM '90

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Santa Fe Energy Operating Partners, L.P.

3. ADDRESS OF OPERATOR
500 W. Illinois, Suite 500, Midland, TX 79701

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

(H) 2080' FNL and 600' FEL

14. PERMIT NO 30-025-29605 15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3952' GR, 3970' KB

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>Plug back & Recomplete</u> <input checked="" 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.)*

*Note: Well is no longer under a communitization agreement

This well has been recompleted from a gas well to an oil well in the Wildcat Delaware pool. The following work has been completed:

- 5-24-90: Set CIBP at 12,886' w/ 50' cmt on top.
- 7-27-90: Set CIBP at 10,241' (T. Wolfcamp) and cap w/ 50' cement. Set CIBP at 7310' (T. Bone Spring) and cap w/ 50' cmt. New PBDT 7260'.
- 7-31-90: Perforated Delaware 5429'-5486' w/ 8 holes (4" casing gun). Spotted 350 gal 7½% Nefe HCl w/ PPI tool. Break down each perf.
- 8-2-90: Acidized perms 5429'-5486' w/ 5000 gals 7½% Nefe HCl and 16 ball sealers.
- 8-6-90: Frac well w/ 7700 gals Boragel + 54,800# 20/40 Ottawa sand and 20,000# 20/40 Super LC.
- 8-8-90: Placed well on 1-3/4" Insert pump and began pump testing.
- 8-19-90: Potential tested Wildcat Delaware zone. Well pumped 71 BO, 52 BW, and 60 MCFG in 24 hours.

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

SIGNED Jerry McCullough TITLE Sr. Production Clerk DATE Aug. 28, 1990

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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