

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

-NM-63019

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Santa Fe Energy Operating Partners, L.P.		8. FARM OR LEASE NAME Bilbrey 27 Federal
3. ADDRESS OF OPERATOR 500 W. Illinois, Suite 500, Midland, TX 79701		9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 990' FWL and 1980' FSL, Sec. 27, T-21S, R-32E		10. FIELD AND POOL, OR WILDCAT Und. Bilbrey Morrow
14. PERMIT NO.		11. SEC., T., S., M., OR BLK. AND SURVEY OR AREA Sec. 27, T-21S, R-32E
15. ELEVATIONS (Show whether DP, RT, GR, etc.) 3685.6' 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"/>	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>Ran liner and released rig</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.)\*

10-10-90: TD 14,772'. PU 77 jts 4-1/2" 13.5#, P-110, LT&C liner and start in hole.

10-11-90: Finished running 4-1/4 liner. Set top of liner at 11,731'. Bottom of liner 14,770'. FC at 14,690'. Cemented w/ 520 sx C1 H w/ .6% CF-9, .6% FloLok-1, .4% TF-4. Plug down at 5:00 a.m. WOC.

10-12-90: Lay down drill pipe, nipple down stack, clean pits. Released rig at 7:00 p.m. WOCU.

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

SIGNED Jerry McCullough TITLE Sr. Production Clerk DATE Oct. 22, 1990

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side