



# NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

**E. JOHNSON**  
Governor  
er A. Salisbury  
inet Secretary

**Lori Wrotenbery**  
Director  
Oil Conservation Division

**CERTIFIED MAIL  
RETURN RECEIPT REQUESTED**

September 8, 2000

20290  
SANTA FE ENERGY OPERATING PARTNERS L P  
1616 S VOSS  
STE 600  
HOUSTON, TX 77057

**Re: Current Status of Oil and Gas Wells**

In May of this year, the Oil Conservation Division ("Division") sent a letter to you setting forth the Division's information on wells for which you are the operator of record. The letter requested a response with additional information. The Division has had no response to the letter. The Division presumes you agree with the information in the letter regarding your inactive wells.

The wells have not shown production or been reported on Form C-115 for more than one year. The wells are not in compliance with the Division's rules and the New Mexico Oil and Gas Act.

You are hereby directed to bring these wells into compliance within 60 days. In the alternative, within 30 days you may submit a compliance plan including a schedule of activities with dates.

Sincerely,

Chris Williams  
District Supervisor

BEFORE EXAMINER	
OIL CONSERVATION DIVISION	
<u>OCD</u>	EXHIBIT NO. <u>27</u>
CASE NO. <u>12771-A</u>	

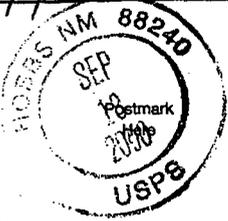
U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

Article Sent To:

**SANTA FE ENERGY**

5680 0895  
3944  
2000  
0222  
6602  
7099 3220

Postage	\$ .33
Certified Fee	1.40
Return Receipt Fee (Endorsement Required)	1.25
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 2.98</b>



Name (Please Print Clearly) (To be completed by mailer)

DISTRICT 1

Street, Apt. No., or P.O. Box No.

1625 N. FRENCH DRIVE

City, State, ZIP+4

HOBBBS NM 88240

PS Form 3800, July 1999

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**20290**  
**SANTA FE ENERGY OPERATING PARTNERS L**  
**P**  
**1616 S VOSS**  
**STE 600**  
**HOUSTON, TX 77057**

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

*Amber [Signature]*

Agent  
 Addressee

D. Is delivery address different from item 1?  Yes

No  
 If YES, enter delivery address below:

3. Service Type

- Certified Mail  Express Mail
- Registered  Return Receipt for Merchandise
- Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Copy from service label)

7099 3220 0002 3944 0895

Return Receipt

102595-00-M-0952