

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION
P.O. Box 2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

JUN 23 1993

C. I. D.

WELL API NO. 30-015-27459

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Kansas City Singer 18

8. Well No. 1

9. Pool name or Wildcat
McMillan (Morrow)

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.)

1. Type of Well:
OIL WELL GAS WELL OTHER

2. Name of Operator
Santa Fe Energy Operating Partners, L.P.

3. Address of Operator
550 W. Texas, Suite 1330, Midland, Texas 79701

4. Well Location
Unit Letter I : 1980 Feet From The South Line and 860 Feet From The East Line
Section 18 Township 20S Range 27E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3354.3' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK PLUG AND ABANDON
TEMPORARILY ABANDON CHANGE PLANS
PULL OR ALTER CASING
OTHER:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ALTERING CASING
COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT
CASING TEST AND CEMENT JOB
OTHER:

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

6/18/93: Spud 17-1/2" hole at 5:00 p.m.

6/19/93: Depth 405'. RU and ran 9 jts 13-3/8" 48# H-40 casing and set at 405'. Cemented w/ 350 sx Cl "C" containing 2% CaCl₂ + 1/4 pps Flocele. Tail w/ 100 sx Cl "C" + 2% CaCl₂. Plug down at 10:30 a.m. Circ 80 sx to pit. WOC.

6/10/93: WOC total of 18 hours. Test casing and hydril to 600# for 30 min., ok. Resume drilling operations.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Terry McCullough TITLE Sr. Production Clerk DATE June 21, 1993
TYPE OR PRINT NAME Terry McCullough TELEPHONE NO. 915/ 687-3551

(This space for State Use) ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT I# DATE JUN 24 1993
APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY: