

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1

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RECEIVED BY
OCT 06 1983
O. C. D.
ARTESIA, OFFICE

8a. Indicate Type of Lease
State ☒ Fee ☐
8. State Oil & Gas Lease No.

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 TO DRILL (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL ☐ GAS WELL ☒ OTHER- Drilling	7. Unit Agreement Name
2. Name of Operator: Santa Fe Energy Company ✓	8. Form or Lease Name Neeley
3. Address of Operator 500 W. Ohio, Midland, Texas 79601	9. Well No. 1
4. Location of Well UNIT LETTER A 990 FEET FROM THE N LINE AND 990 FEET FROM THE E LINE, SECTION 28 TOWNSHIP 22S RANGE 27E NMPM.	10. Oil and Pool, or Well locat Undesignated South Carlsbad Morrow
15. Elevation (Show whether DF, RT, GR, etc.) 3116.7 GR	12. County Eddy

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	COMMENCE DRILLING OPNS. ☒
PULL OR ALTER CASING ☐	CASING TEST AND CEMENT JOB ☐
OTHER ☐	OTHER ☐
PLUG AND ABANDON ☐	ALTERING CASING ☐
CHANGE PLANS ☐	PLUG AND ABANDONMENT ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1109.

9-30-83 Spud well @11:30 p.m.
Drilled to 568'
Casing: 13 3/8 61# ST&C K55 set @ 568
cmt w/635 SX Class C 2% Ca Cl₂,
1/4 # Flocele per sx -

10-2-83 Plug down @ 12:25 p.m. - Circ. 10 sx cmt to surface.
WOC 26 1/4 hrs

10-3-83 Nipple up BOP Test to 600 Psi. Tested 30 min.

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

SIGNED Billy Hood TITLE Senior Production Clerk DATE 10-3-83
Original Signed By
Leslie A. Clements
Supervisor District II
APPROVED BY _____ TITLE _____ DATE _____
NOV 04 1983
CONDITIONS OF APPROVAL, IF ANY: