

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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

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

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-015-25623
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	Johnson
8. Well No.	1
9. Pool name or Wildcat	Otis (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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	SANTA FE SNYDER CORP.
2. Name of Operator	Santa Fe Energy Resources, Inc. ✓
3. Address of Operator	550 W. Texas, Suite 1330, Midland, TX 79701
4. Well Location Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>24</u> Township <u>22S</u> Range <u>27E</u> NMPM <u>Eddy</u> County	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3100.5' KB

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: Add Morrow perfs ☐

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.

5/24/96: RIH w/ 1-11/16" strip gun. Perforate the Morrow formation from 11,898'-11,902'. Had gatherer change out plate in meter run. At 4:00 p.m., put well on line at 1000 MCFPD rate. FTP 1925 psi on 12/64" choke.

RECEIVED

JUL 11 1996

WILLIAM B. DOW

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 7/8/96

TYPE OR PRINT NAME Terry McCullough TELEPHONE NO. 915/687-3551

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE JUL 16 1996

CONDITIONS OF APPROVAL, IF ANY: