

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-80
30-015-25688

1a. Indicate Type of Lease
State ☐ Fee ☐
b. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO CEMENT 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 ☐	RECEIVED BY FEB - 5 1987 O. C. D. ARTESIA OFFICE	7. Unit Agreement Name
2. Name of Operator Santa Fe Energy Operating Partners, L.P.		8. Farm or Lease Name Hargis
3. Address of Operator 500 W. Illinois, Suite 500, Midland, TX 79701		9. Well No. 1
4. Location of well UNIT LETTER <u>G</u> 1980 FEET FROM THE <u>North</u> LINE AND 1980 FEET FROM THE <u>E</u> LINE, SECTION <u>24</u> TOWNSHIP <u>22S</u> RANGE <u>27E</u> N.M.P.M.		10. Field and Pool, or Midcat Undes. Otis Morrow
15. Elevation (Show whether DF, RT, GR, etc.) 3054.7		12. County Eddy

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☒	

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 1103.

1-27-87: Ran 7" csg 26# 598 N80 @ 10,063'. Cmt w/475 sx Cl H 50/50 poz 2% gel .06% D60, 0.15% D113 followed by 325 sx Cl H, 1.5 gal/sk D600, 0.8 gal/sk D135, 0.5% D165, 0.5 gal/sk D47, 2% KCl. Circ cmt. WOC 26 hr test to 1500 psi.

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

SIGNED Billie Hood Billie Hood TITLE Sr. Production Clerk DATE 2-3-87

Original Signed By

APPROVED BY

Jan A. Gentry

TITLE

DATE

FEB 12 1987

CONDITIONS OF APPROVAL, IF ANY: