

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other Instru-
verse side)

1. BUREAU OF LAND MANAGEMENT
Bureau No. 1014
Expires August 31, 1985

clsf

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—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Santa Fe Energy Operating Partners, L.P.	8. FARM OR LEASE NAME Sterling Silver 33 Federal
3. ADDRESS OF OPERATOR 500 W. Illinois, Suite 500, Midland, TX 79701	9. WELL NO. 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State or Federal regulations. See also space 17 below.) At surface 1980' FEL & 1980' FNL of Sec. 33	10. FIELD AND POOL, OR WILDCAT Undes. W. Sand Dunes Morrow
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 33, T-23S, R-31E
15. ELEVATIONS (Show whether DF, RT, or ST) 3390.5'	12. COUNTY OR PARISH Eddy
	13. STATE NM

RECEIVED BY
FEB -6 1987
O. C. D.
ARTESIA, OFFICE

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Cmt. csg.</u>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

1-26-87: Ran 7", 29# & 26# @ 11,975'. Cmt w/910 sx C1 H poz prem 6# salt, 0.6% Halad 22A, 1.32 cu.ft./sx 14.3 ppg. Plug down 7:15 AM. WOC 35 hrs. Test csg to 2000 psi.

ACCEPTED FOR RECORD

FEB 05 1987

John
CARLSBAD, NEW MEXICO

18. I hereby certify that the foregoing is true and correct

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

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side