

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-49385	
2. NAME OF OPERATOR Santa Fe Energy Operating Partners, L.P.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 500 W. Illinois, Suite 500, Midland, TX 79701		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FSL & 1980' FEL, Sec. 3, T-24S, R-29E		8. FARM OR LEASE NAME H. B. 3 Federal	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3052.2' GL		10. FIELD AND POOL, OR WILDCAT Cedar Canyon	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 3, 24S, 29E	
		12. COUNTY OR PARISH Eddy	
		13. STATE NM	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) Spud & set casings	

(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.)

Spud well @ 11:00 AM 7-22-87

7-22-87: Ran 13 3/8" 54.5 ppf LT&C @ 714'. Cmt w/750 sx Cl C, 2% CaCl₂, 1/4#/sk flocele. Slurry wt 14.8, slurry volume 176 bbls. Circ 50 sx to surface. Plug down @ 12:30 AM 7-23-87. WOC 13 3/4 hrs. Test to 600 psi. Resume drilling.

7-29-87 Ran 9 5/8" 43.5 ppf K55 ST&C @ 3082'. Cmt w/2000 sx Pacesetter Lite, 18.0# salt/sk, 1/4#/sk flocele. Slurry wt 12.9, slurry volume 737. Tail in w/300 sx Cl C Neat. Slurry wt. 14.8, slurry volume 71. Circ 250 sx to surface. Plug down @ 9:30 AM 7-29-87. WOC 36 hrs. Test to 1600 psi. Resume drilling 7-30-87.

RECEIVED

AUG 3 9 22 AM '87

CARLSBAD RESOURCE
AREA HEADQUARTERS

ACCEPTED FOR RECORD

SJS

AUG 4 1987

CARLSBAD, NEW MEXICO

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

SIGNED Bullie Hood

TITLE Sr. Production Clerk

DATE 7-31-87

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side