

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP  
(Other instructions  
verse side)

DATE

Budget Bureau No. 1004-0135  
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  GAS WELL  OTHER

2. NAME OF OPERATOR: Santa Fe Energy Operating Partners, L.P.

3. ADDRESS OF OPERATOR: 500 W. Illinois, Suite 500, Midland, TX 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface: 1780' FNL & 330' FEL of Sec. 34, T-22S, R-28E

14. PERMIT NO. 15. ELEVATIONS (Show whether DP, RT, GR, etc.): 3068' GR

5. LEASE DESIGNATION AND SERIAL NO: NM 19842-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME: Northeast Loving 34 Federal

9. WELL NO: 2

10. FIELD AND POOL, OR WILDCAT: Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: 34, T-22S, R-28E

12. COUNTY OR PARISH: Eddy 13. STATE: NM

RECEIVED

JAN 20 '89

O. C. D.  
ARTESIA, OFFICE

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) Set csg <input type="checkbox"/>	

(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.) \*

11-18-88 Ran 102 jts 4 1/2" 10.5# csg & set @ 4075'. Cmt w/900 sx 65/35 Poz 2% gel 1/4# flocele, 15#/sk salt. Slurry wt 12.7. Followed by 400 sx 50/50 Poz 5# salt/sk, slurry wt 14.0. Did not circ to surface. WOC 8 1/2 hrs. Ran temperature survey - TOC @ 505'. Released rig 11-18-88. Currently completing.

18. I hereby certify that the foregoing is true and correct  
SIGNED Billie Hood TITLE Sr. Production Clerk DATE 1-9-89

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

JAN 17 1989

\*See Instructions on Reverse Side

SJS  
CARLSBAD, NEW MEXICO