

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

RECEIVED  
AUG - 2 1993

|  |  |
|--|--|
| WELL API NO.                                       | 30-015-27136   |
| 5. Indicate Type of Lease                          | STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.                       | NM-V-2631  |
| 7. Lease Name or Unit Agreement Name               | Mosley Canyon State Unit   |
| 8. Well No.  | 1  |
| 9. Pool name or Wildcat                            | Baldrige Canyon (Stawn)  |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) | 3867.3' GR   |

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:<br>OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> | 2. Name of Operator<br>Santa Fe Energy Operating Partners, L.P.  |
| 3. Address of Operator<br>550 W. Texas, Suite 1330, Midland, Texas 79701  | 4. Well Location<br>Unit Letter B : 660 Feet From The North Line and 1980 Feet From The East Line<br>Section 9 Township 24S Range 25E NMPM Eddy County |

|   |  |
|---|--|
| 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data |  |
| NOTICE OF INTENTION TO:   | SUBSEQUENT REPORT OF:  |
| PERFORM REMEDIAL WORK <input type="checkbox"/>                                | REMEDIAL WORK <input type="checkbox"/>                         |
| TEMPORARILY ABANDON <input type="checkbox"/>                                  | ALTERING CASING <input type="checkbox"/>                       |
| PULL OR ALTER CASING <input type="checkbox"/>                                 | COMMENCE DRILLING OPNS. <input type="checkbox"/>               |
| OTHER: <input type="checkbox"/>   | PLUG AND ABANDONMENT <input type="checkbox"/>                  |
|   | CASING TEST AND CEMENT JOB <input type="checkbox"/>            |
|   | OTHER: Change of well name <input checked="" type="checkbox"/> |

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.

This well was originally permitted as the Mosley Canyon "9" State Com #1, but due to the formation of the Mosley Canyon State Unit, we respectfully request the name be changed to Mosley Canyon State Unit Well No. 1.

Post ID-8  
8-27-93  
chg well name

|  |  |
|--|--|
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. |  |
| SIGNATURE <u>Terry McCullough</u>  | TITLE <u>Sr. Production Clerk</u> DATE <u>Aug. 3, 1993</u> |
| TYPE OR PRINT NAME <u>Terry McCullough</u>   | TELEPHONE NO. <u>915/687-3551</u>                          |

|                                 |  |             |                          |
|---------------------------------|--|-------------|--------------------------|
| (This space for State Use)      | ORIGINAL SIGNED BY<br>MIKE WILLIAMS<br>SUPERVISOR, DISTRICT II | TITLE _____ | DATE <u>AUG 2 0 1993</u> |
| APPROVED BY _____               |  |             |                          |
| CONDITIONS OF APPROVAL, IF ANY: |  |             |                          |