F (Jı Drawer DD Artesia, NMRN 882111

NM OIL CONS COMMISSION

| orm 3160-5   | UNITED STATES  | Ar              | Budget Bureau No. 1004-0135  Expires: March 31, 1993   |  |
|--|--|-----------------|--|--|
| une 1990)  | IMENT OF THE INTERIOR  |                 | 5. Lease Designation and Serial No.  |  |
|  | J OF LAND MANAGEMENT   | ļ               | NM-55142   |  |
|  | S AND REPORTS ON WELLS   | l               | 6. If Indian, Allottee or Tribe Name   |  |
|  | o drill or to deepen or reentry to a different reserv                          | oır.            |  |  |
| Use "APPLICATION   | FOR PERMIT - " for such proposals  |                 |  |  |
|  | BMIT IN TRIPLICATE   |                 | 7. If Unit or CA, Agreement Designation  |  |
| 1. Type of Well  X Oil Gas Well Other  |  |                 | 8. Well Name and No.<br>Sterling Silver  |  |
| 2. Name of Operator Santa Fe Energy Resources, Inc.  |  |                 | "3" Federal #7   |  |
| 3. Address and Telephone No.   |  |                 | 30-015-27714   |  |
| 550 W. Texas, Suite 1330, Midland, TX 79701 (915) 687-3551  4. Location of Well (Footage, Sec., T., R., M., or Survey Description) |  |                 | 10. Field and Pool, or exploratory Area  |  |
| (K), 1980' FSL and 2310' FWL, Sec. 3, T-24S, R-31E   |  |                 | Ingle Wells (Delaware) 11. County or Parish, State   |  |
|  |  |                 | Eddy Co., NM   |  |
| 12. CHECK APPROPRIATE I  | BOX(s) TO INDICATE NATURE OF NOTICE, RI  | EPORT,          | OR OTHER DATA  |  |
| TYPE OF SUBMISSION   | TYPE OF  | TYPE OF ACTION  |  |  |
| Notice of Intent   | Abandonment  |                 | Change of Plans  |  |
| Notice of Intern   | Recompletion   |                 | New Construction   |  |
| X Subsequent Report  | Plugging Back  |                 | Non-Routine Fracturing   |  |
|  | Casing Repair  | e de            | Mater Shut-Off   |  |
| Final Abandonment Notice   | Altering Casing  | a partie of     | Conversion to Injection  |  |
|  | X Other Ran casing s   | <u>tring</u>    | Dispose Water  |  |
|  | _  | /               | (Note: Repertyrefulls of multiple completion on Well Completion or Recompletion Report and Log form.)  |  |
| 3. Describe Proposed or Completed Operations (Clear  | rly state all pertinent details, and give pertinent dates, including estimated | date of startin | ng any proprised work. If well is directionally drilled,   |  |
| give subsurface locations and measured and   | d true vertical depths for all markers and zones pertinent to this work.)*     | 100             | 1995   |  |
| 02/10/95:  |  | 150             | 18T. 6   |  |
| 02/10/95: Depth 4205'. RU casing crew.  02/11/95: Depth 4205' FC @ 4124'. RU BJ and cement w/ 1050 sx                              |  |                 |  |  |
| 00 (11 (0F) 8%"  |  |                 |  |  |
| 02/11/95:  |  | DII R 1         | and cement w/ 1050 sx  |  |
| Ran 94 jts 32# J-55 ST&C ca  | asing and set at $4205$ '. FC @ $4124$ '.                                      | RU DU<br>200 ev |  |  |
| C  C Lite containing 9 pps   | salt & 1/4 pps Celloseal. Tail w/ 2<br>c'd 140 sx to pit. WOC. Cut off 13      | 3-3/8"          | and 8-5/8". Weld on  |  |
| down at 5:30 a.m. Moi. Cir   | C u 140 SX to pic. Woo. Cut off 1  | 3 0,0           |  |  |
| head & NU BOP.   | <b>—</b> En (2)  | one n <b>n</b>  | rea  |  |
| N2/12/95·  | リ<br>記<br>に<br>に<br>に<br>に<br>に<br>に<br>に<br>に<br>に<br>に<br>に<br>に<br>に        | JEI Y           |  |  |
| Finish NU and test BOP and   | choke manifold to 1500 psi, R. PU  | BHA ar          | nd TIH. WOC for total of   |  |
| 24 hours. Test csg and Hyd   | dril to 1500 psi, ok. Resume drilli  | ႙ၟႎၟၣၯႄၔႃ       | कृतिons.   |  |
|  | · · · · · · · · · · · · · · · · · · ·  | 1 20 1          |  |  |
|  |  | ~@W             | . DIV.   |  |
|  |  |                 |  |  |
|  |  | dist.           | 2  |  |
| 14. Thereby certify that the foregoing is true Ad co   | oriech (   |                 |  |  |
| Signed DeNett Now  | Clough Title Sr. Production Clerk  |                 | Date 02/16/95  |  |
|  | -  |                 | The second secon |  |
| (This space for Federal of State office use)   | Title  | AC              | CETT   |  |
| Approved by  |  | 1               |  |  |

| 14. I hereby certify that the foregoing is true and correct Signed Supply Culloude Title Sr. Production Cler  | k <u>Date</u> <u>02/16/95</u>   |
|---|---|
| (This space for Federal of State office use)  Approved by Title  Conditions of approval, if any:  | ACCEPTED: 18.1995   |
| Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or age or representations as to any matter within its jurisdiction. | ncy of the United States any false, fictitious or fraudulent statements |
| * See Instruction on Reverse Side   | CARLSBAD, NEW MEXICO  |