

ROBERT L. BAYLESS

P. O. BOX 168
FARMINGTON, NM 87499

FAX NO
(505) 326-6911

OFFICE NO
(505) 326-2659

Santa Rosa 5-1

Daily Report

Page 2

35.75 bbls water. Good circulation throughout job.
Circulate 4.5 bbls cement to surface. Bumped plug with
1650 PSI. Held OK. Release rig at 2400 hrs., 6/13/90. Wait
on completion.

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

WELL API NO. <u>30-045-27794</u>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Santa Rosa S
8. Well No. 5-1
9. Pool name or Wildcat Basin Fruitland Coal

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5640' GL; 5650' RKB

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: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	2. Name of Operator Robert L. Bayless	3. Address of Operator P.O. Box 168, Farmington, NM 87499	4. Well Location Unit Letter <u>G</u> : <u>1575</u> Feet From The <u>North</u> Line and <u>1340</u> Feet From The <u>East</u> Line Section <u>5</u> Township <u>24N</u> Range <u>10E</u> NMPM San Juan County
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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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input checked="" type="checkbox"/>		OTHER: <input 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.

Please change operator from Bayless Minerals, Inc. to Robert L. Bayless.

RECEIVED
MAY 14 1990
OIL CON. DIV
DIST. "

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Robert L. Bayless TITLE Operator DATE 5-14-90

TYPE OR PRINT NAME Robert L. Bayless TELEPHONE NO. 505/326-2659

(This space for State Use)

APPROVED BY Original Signed by FRANK T. CHAVEZ TITLE ENERGY DIVISION DISTRICT DATE MAY 14 1990

CONDITIONS OF APPROVAL, IF ANY: