

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

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 GAS WELL OTHER

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

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

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1980' FSL and 1980' FWL, Sec. 28, T-21S, R-32E
Unit K

14. PERMIT NO. API # 30-025-30664

15. ELEVATIONS (Show whether DE, RT, GR, etc.)
3682.7' GR

5. LEASE DESIGNATION AND SERIAL NO.
NM - 63020

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Bilbrey 28A Federal

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Und. Bilbrey Morrow

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 28, T-21S, R-32E

12. COUNTY OR PARISH
Lea

13. STATE
NM

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"/> FRACTURE TREAT <input type="checkbox"/> SHOOT OR ACIDIZE <input type="checkbox"/> REPAIR WELL <input type="checkbox"/> (Other) <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETE <input type="checkbox"/> ABANDON* <input type="checkbox"/> CHANGE PLAN <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/> FRACTURE TREATMENT <input type="checkbox"/> SHOOTING OR ACIDIZING <input type="checkbox"/> (Other) <input type="checkbox"/> <u>Set liner</u>	REPAIRING WELL <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> ABANDONMENT* <input type="checkbox"/> <input checked="" type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. GENERAL SUMMARY OF 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.)*

- 12-2-89: Depth 14,800'. Ran 80 jts 4-1/2" 13.5# J-95, LT&C liner. Set liner from 11,552'-14,800'. Cemented w/ 450 sx Premium w/ .6% Halad 22A, .4% CFR3, .6% gas stop and 5#/sk KOL. Plug down at 10:30 a.m. CST. WOC.
- 12-3-89: WOC total of 13 hours (Option II). TIH and tag cement at 10,996'. Drilled out 556' of cmt to 11,552'. Displaced hole w/ fresh water.
- 12-4-89: Lay down drill pipe. Nipple down stack and clean pits. Released rig at 9:30 p.m. CST on 12-4-89. WOCU.

RECEIVED

Ac

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

SIGNED *Sup McCallough* TITLE Sr. Production Clerk DATE Dec. 11, 1989

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: