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to Appropriate
District Office

State of New Mexico JUL - 5 1996
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 APPL. NO. 30-015-28959

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
Ft. Sedgewick "26" State Com

1. Type of Well:
OIL WELL ☐ GAS WELL ☒ OTHER

2. Name of Operator
Santa Fe Energy Resources, Inc. ✓

8. Well No.
1

3. Address of Operator
550 W. Texas, Suite 1330, Midland, TX 79701

9. Pool name or Wildcat
Und. Winchester, Morrow

4. Well Location
Unit Letter C : 660 Feet From The North Line and 1780 Feet From The West Line

Section 26 Township 19-S Range 28E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3344' GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☒ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

6/30/96: Spud 17-1/2" hole at 8:30 a.m. CST. Drilled to 425'. RU and ran 9 jts 13-3/8" 48.0# H-40 ST&C casing and set at 423'. Cemented w/ 200 sx Cl "C" containing 6% gel and 1/4 pps Flocele, followed by 200 sx Cl "C" + 2% CaCl2. Cement did not circulate. Wait on cement 4 hrs. TOC at 50'. Bring cement to surface with additional 200 sx Cl "C" + 2% CaCl2.

7/1/96: WOC. Cut csg off & weld on head. NU BOP stack. WOC. Press test casing to 600#, ok. TIH. WOC total of 24 hours. Resume drilling operations.

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

SIGNATURE Terry McCullough TITLE Sr. Production Clerk DATE 7/3/96

TYPE OR PRINT NAME Terry McCullough TELEPHONE NO. 915/687-3551

(This space for State Use)

ORIGINAL SIGNED BY TIM W. CUM
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

JUL 8 1996