

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artesia, NM 88210

NM Oil Cons. Commission
SUBMIT IN TRIPI
(Other Instructions
on Reverse Side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

45F

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 Exploration Company ✓

3. ADDRESS OF OPERATOR
P. O. Box 1136, Roswell, NM 88202-1136

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
1980' FSL & 1980' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, ST, GR, etc.)
3724.3 GR

5. LEASE DESIGNATION AND SERIAL NO.
Old #: NM NM 68078
New #: NM NM 70402

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Holmstrom Federal

9. WELL NO.
#1

10. FIELD AND POOL, OR WILDCAT
Wildcat Devonian

11. SEC., T., R., M., OR BLM. AND
SURVEY OR AREA
SE/4 Sec. 9, T14S, R29E

12. COUNTY OR PARISH
Chaves

13. STATE
NM

16. 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"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other) Spud Well & Set Surf. Csg.	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
PULL OR ALTER CASING	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>		

17. DESCRIBE PROPOSED OR 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.)

Spud Well at 6:30 AM on 7-29-88. Ran 7 jts 13-3/8" 54.5# K-55 surface casing (306.34' total pipe). Set at 300'. Dowell cemented w/330 sx AG-2 w/2% CaCl & 1# flocele/sk. PD @ 12:30 PM on 7-30-88. Circ 50 sx to surf. TOC @ surface.

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

SIGNED Peter W. Chester

TITLE Production Analyst

DATE 8/01/88

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD
PETER W. CHESTER
DATE

AUG 4 1988

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side