

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. 30-025-25061
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. L-990
7. Lease Name or Unit Agreement Name West Knowles Unit
8. Well No. No. 6
9. Pool name or Wildcat West Knowles Drinkard

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator Santa Fe Exploration Company
3. Address of Operator P. O. Box 1136, Roswell, New Mexico 88202-1136	4. Well Location Unit Letter F : 1,880 Feet From The North Line and 1,880 Feet From The West Line Section 35 Township 16-S Range 37-E NMPM Lea County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3,769' GR	

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"/>	REMEDIAL WORK <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input 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.

Operations began 8-5-92:

Initial fluid level at +/- 1,700'. SICP=0. SITP=0.

Swab test to determine fluid entry. Made 3 runs recovering approximately 10 BW and 0 BO. Found leak in flowline and shut down swab operations. Flange well down, nipple up BOP and TOH with 2 3/8" tbg. PU 4 1/2" casing scraper and TBIH with scraper and tbg. Run scraper to +/- 6,100' with no drag and no tight spots. TOH with tbg. and LD scraper. TBIH with tbg. and flange well up.

SD to repair flowline and await further instructions.

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

SIGNATURE Richard C. Gilliland TITLE Petroleum Engineer DATE 8-10-92  
(505)  
TYPE OR PRINT NAME Richard C. Gilliland TELEPHONE NO 623-2733

(This space for State Use)  
ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

AUG 17 '92