

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TR. DATE
(Other instructions
over, and)

Form approved.
Budget Bureau No. 100-
Expires August 31, 1985
LEASE DESIGNATION AND SERIAL NO.
NM 40452

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Santa Fe Energy Operating Partners, L.P.	8. FARM OR LEASE NAME Shinnery 14 Federal
3. ADDRESS OF OPERATOR 500 W. Illinois, Suite 500, Midland, Texas 79701	9. WELL NO. 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 330' FSL and 660' FEL of Sec. 14, T-18S, R-32E	10. FIELD AND POOL OR WILDCAT Quechero Plains Upper Bone Spring
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 14, 18S, 32E
15. ELEVATIONS (Show whether DF, RT, GN, etc.) 3801.5' GR	12. COUNTY OR PARISH Lea
	13. STATE N. Mexico

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

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 17½" hole at 7:30 a.m. on 3/10/89.

3-10-89 Ran 10 jts 13-3/8", 48#, H&TC (440') and set at 435'. Cmt'd w/ 500 sx. Class "C" w/ 2% CaCl₂ and ¼# Celloflake/sx. Plug down at 5:27 P.M. (CST). Circ'd 25 sx. to surface. WOC 12½ hours (Option II). NU BOP. Resume drilling operations.

3-13-89 Ran 70 jts. 8-5/8", 24#, K-55, ST&C (2758') and set at 2750'. Cmt'd w/ 1200 sx. 35/65 Cl. "C" POZ w/ 6% gel, 10% salt, ¼# Celloflake followed by 350 sx. Cl. "C" containing 2% CaCl₂. Circ'd 250 sx. to surface. WOC 24½ hours. Tested csg to 1500 psi. Resumed drilling operations on 3/14/89.

RECEIVED
MAR 30 11 14 AM '89
CARLSBAD AREA

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

SIGNED <u>Jerry McCullough</u>	TITLE <u>Sr. Production Clerk</u>	DATE <u>March 21, 1989</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

ACCEPTED FOR RECORD

APR 6 1989

*See Instructions on Reverse Side

SJS
CARLSBAD, NEW MEXICO

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or documents.