

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE\*  
(Other instruction on reverse side)

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 <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 Uncle Sam 13 Federal	
3. ADDRESS OF OPERATOR 500 W. Illinois, Suite 500, Midland, TX 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 1980' FNL and 1980' FEL, Sec. 13, T-18S, R-32E		10. FIELD AND POOL, OR WILDCAT Und. West Corbin Delaware	
14. PERMIT NO. API # 30-025-30838		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec. 13, T-18S, R-32E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3848.6' GR		12. COUNTY OR PARISH Lea	
		13. STATE New 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) Commence Drilling Oper. <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.) \*

3-30-90: Spud 12-1/4" hole at 4:00 p.m. MST

3-31-90: Depth 438'. Ran 11 jts. 8-5/8" 24# J-55 ST&C 8rd casing and set at 437'. Cemented w/ 275 sx Class C w/ 2% CaCl<sub>2</sub> + 1/4#/sk cellophane flakes. Circ'd 50 sx to pit. Plug down at 2:00 a.m. MST. WOC 12½ hours (Option II). Test BOP and casing to 1500 psi - okay. Resume drilling operations.

APPROVED  
AEC

APR 3 11 29 AM '90

RECEIVED

CARLSBAD, NEW MEXICO

18. I hereby certify that the foregoing is true and correct  
SIGNED Sperry McCullough TITLE Sr. Production Clerk DATE April 2, 1990  
(This space for Federal or State office use)

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

\*See Instructions on Reverse Side