

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
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.)

RECEIVED
NOV 16 AM '90

5. LEASE DESIGNATION AND SERIAL NO.
NM-81958

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Uncle Sam 13C Federal

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
West Corbin Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 13, T-18S, R-32E

12. COUNTY OR PARISH
Lea

13. STATE
NM

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Santa Fe Energy Operating Partners, L.P.

3. ADDRESS OF OPERATOR
550 W. Texas, Suite 1330, Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
(A) 660' FNL and 660' FEL

14. PERMIT NO.
API #30-025-30997

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3839' GR

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 PLANE <input type="checkbox"/>	(Other) <u>Ran casing and RR</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.)

12-1-90: Depth 5300' (TD). Ran logs.

12-2-90: RU and ran 125 jts 5-1/2" 15.5# K-55 ST&C and LT&C casing and set at 5300'. Cemented w/ 1075 sx Cl C lite 65/35/6 containing 5% salt. Tail w/ 200 sx Cl C w/ 1% FL-20 and 3% KCl. Circulated to surface. ND BOP. Set slips w/ all weight. Cut off 5-1/2" csg and weld on cap. Jet and clean pits. Released rig at 12:00 p.m. WOCU.

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

SIGNED Jerry McCullough TITLE Sr. Production Clerk DATE 12-4-90

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____

*See Instructions on Reverse Side