

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

Form 3160-5
June 1990

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM-77057
2. Name of Operator Santa Fe Energy Operating Partners, L.P.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 550 W. Texas, Suite 1330, Midland, TX 79701 (915) 687-3551	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) (P), 330' FSL and 330' FEL, Sec. 9, T-22S, R-32E	8. Well Name and No. White Swan 9 Fed #1
	9. API Well No. 30-025-32000
	10. Field and Pool, or Exploratory Area Livingston Ridge, E. (Del)
	11. County or Parish, State Lea Co., NM

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Ran casing string</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

6/24/93: Depth 4590'. RU and run 114 jts 8-5/8" 32# K-55 casing and set at 4586'. Cemented 1st stage w/ 1200 sx Cl "C" 35/65/6 + 9 pps salt and 1/4 pps Celloflake. Tail w/ 500 sx Cl "C" + 2% CaCl₂. Plug down at 10:25 p.m. Circ 165 sx to pit. WOC.

6/25/93: WOC. Cut off 8-5/8" csg. Weld on braden head. NU BOP and kill manifold. Pressure test BOP, KM and valves to 3000 psi. Fixing leaks.

6/26/93: Replaced kill line check valve and dart valve. Hydril tested to 1500 psi, ok. WOC total of 37 hours. Resume drilling operations.

14. I hereby certify that the foregoing is true and correct
Signed [Signature] Title Sr. Production Clerk Date June 28, 1993
(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: [Signature] 2/1993

