

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Encl., 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

2040 Pacheco St.
Santa Fe, 87505

WELL API NO.
30-025-28540

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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 ☒ GAS WELL ☐ OTHER

2. Name of Operator
Saba Energy of Texas, Inc.

3. Address of Operator
1603 S.E. 19th Street, Suite 202 Edmond, OK 73013

4. Well Location
Unit Letter H : 2310 Feet From The North Line and 990 Feet From The East Line

Section 7 Township 13S Range 36E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4004' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: perforate additional interval ☒

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.

11/17/97 MIRU COMPLETION UNIT. ND WELLHEAD. NU BOP. RELEASE PKR. PU & RIH W/4 JTS 2-7/8" TBG. RESET PKR, BTM OF PKR @ 10908', BTM OF TBG @ 10978'. RU WL. RIH W/2-1/8" THRU-TBG GUN & PERF CANYON DOLOMITE "B" FROM 11058-11064' & 11076-11080' W/2 SPF (10' - 20 HOLES). ACIDIZE CANYON "B" W/3000 GALS 15% HCL. TURN WELL TO PRODUCTION. FLOWING WELL ON A 14/64" CK, FTP 50 PSI, REC 97 BO, 24 BW.

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

SIGNATURE Tracy Mills TITLE Er

TYPE OR PRINT NAME Tracy Mills

(This space for State Use)

ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

Perfs
11058-11080

, 1998

3600

11-1998