

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 87240
 District II
 811 South First, Artesia, NM 87210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised March 25, 1999

OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

WELL API NO.	30-025-30780
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	Wet Dollarhide Queen Sand Unit
8. Well No.	155
9. Pool name or Wildcat	Dollarhide Queen Sd
10. Elevation (Show whether DR, RKB, RT, GR, etc.)	

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 OtherWIW

2. Name of Operator
 Saga Petroleum LLC

3. Address of Operator
 415 W. Wall, Suite 1900
 Midland, TX 79701

4. Well Location
 Unit Letter F : 2240 feet from the North line and 2210 feet from the West line
 Section 30 Township 24S Range 38E NMPM County LEA

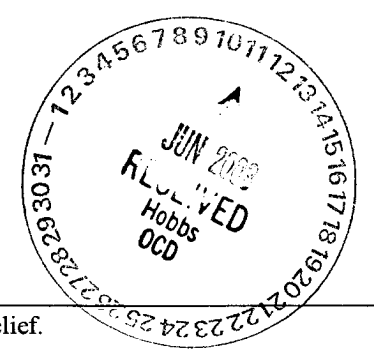
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
MULTIPLE COMPLETION <input type="checkbox"/>	OTHER:MIT <input checked="" type="checkbox"/>
OTHER: <input type="checkbox"/>	

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work). SEE RULE 1103. For Multiple Completions: Attach diagram of proposed completion or recompletion.

OCD Bradenhead Test MIT failure -repaired as follows
 5-28-03 thru 5-30-03 RU vac trk, blow well dwn, pull tension on pkr, attempt to test-no luck, unset pkr, PUH 1-jt, reset pkr, attempt to test w/no luck. Unset pkr, PUPH 1-jt, try to test-no luck. Unset pkr & POOH w/tbg, HIT in jt 89 from surface, LD pkr . RU Vac trk. Bleed well dn. RU Basin Testers & test tbg in hole 7000# below slip everything tested ok. RD tbg testers. Set pkr. NUWH. Test csg to 500# for 15 min. Rls pkr. Circ pkr fluid 120 bbls. Set pkr. Ran chart 500# for 15 min-Lost to 460#. Re-chart to 500# 15 min -Lost to 470#. Let set overnight - will rechart

5-30-03 Press up to 550 psi - held for 30 mins - good test - chart attached



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

SIGNATURE Bonnie Husband TITLE Production Analyst DATE 06/09/2003

Type or print name Bonnie Husband Telephone No. (432)684-4293

(This space for State use)

APPROVED BY Gary W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE JUN 17 2003

Conditions of approval, if any:

