Submit 1 Copy To Appropriate District	State of New Mexi	ico	Form	C-103
Office <u>District I</u> – (575) 393-6161	Energy, Minerals and Natura	al Resources	Revised July	18, 2013
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION D		30-025-34477 5. Indicate Type of Lease	
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Franci		STATE SFEE	
District IV - (505) 476-3460	Santa Fe, NM 875	505	6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505				
SUNDRY NOTIO	CES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement	Name
	ALS TO DRILL OR TO DEEPEN OR PLUG ATION FOR PERMIT" (FORM C-101) FOR		Monument "1" State	
PROPOSALS.)	p.		8. Well Number 26	
	Gas Well Other SWD			
2. Name of Operator SAHARA O	PERATING COMPANY	0 7 2016	9. OGRID Number 20077	
3. Address of Operator		CEIVED	10. Pool name or Wildcat	
P.O. BOX 4	130, MIDLAND, TX 79704	CEIVED	MONUMENT ABO, NORTH	
4. Well Location				
Unit Letter <u>J</u> :	2279 feet from the SOUTH	H line and	276' feet from the <u>EAST</u>	line
Section 1		Range 32-E	NMPM LEA Cour	nty
	11. Elevation (Show whether DR, R			
	3734' (OL	Republic approximation of the second second	
12 Check A	munumista Davi ta Indianta Nat	time of Matine D	an art an Othan Data	
12. Check A	ppropriate Box to Indicate Nat	ture of Notice, R	leport of Other Data	
NOTICE OF IN	FENTION TO:	SUBS	EQUENT REPORT OF:	
PERFORM REMEDIAL WORK		REMEDIAL WORK		NG
TEMPORARILY ABANDON		COMMENCE DRIL		
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	JOB 🗌	
CLOSED-LOOP SYSTEM		OTHER:		
	eted operations. (Clearly state all per		give pertinent dates, including estim	ated date
of starting any proposed wor	k). SEE RULE 19.15.7.14 NMAC.	For Multiple Com	pletions: Attach wellbore diagram of	of
proposed completion or reco	mpletion.			
~				~
Commence work to convert to				
	elow 5812-6050' and swab tes			
It no show, will perf below 541	0'-5622', acidize, and run line	ed injection tubi	ig to place on disposal service	
	2.07.2016			
Intend to commence work on 0	3-07-2016			
		[
Spud Date:	Rig Release Date:	:		
I hereby certify that the information a	bove is true and complete to the best	t of my knowledge	and belief.	
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ACH.	she and	1		
SIGNATURE	TITLE Presid	dent	DATE <u>3-4-2016</u>	-
Dense an unint name Dobort MaA	ning E mail address De	hacherooner	DUONE: 422 607 00	67
Type or print name <u>Robert McA</u> For State Use Only	E-mail address: <u>Ro</u>	ouwsanaraoper.	com PHONE: <u>432-697-09</u>	07
TO State Use Univ			_1.	1.1
APPROVED BY:	TITLE Petrole	um Engineer	DATE 03/07	116
Conditions of Approval (if any):	1000			
E. All AM	T INJECT UN			
CAN NO	INJECT UN	TIL MI	TEST IL COM	11
			17 COMI	DAR

MAR 0 8 2016