Debts: C-573 39-616 Los	Office	State of New M		Form C-1	
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1. Type of Well: Oil Well X Gas Well Other 8. Well Number 0.02		N FOR PERMIT" (FORM C-101) F	П.S. КЕ		
2. Name of Operator SABER OIL & GAS VENTURES, LLC 3. Address of Operator 400 W. ILLINOIS & CH.S. JUITE 950, MIDLAND, TEXAS 79701 4. Well Location Unit Letter G: 1650 feet from the NORTH line and 1650 feet from the EAST line Section 15 Township 20S Range 36E NMPM County LEA 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,569 - DR 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF IN PERFORM REMEDIAL WORK INT TO PA P&A R R R R R R R R R R R R R R R R R R R		s Well Other		Number	,
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PERF. SQZ. HOLES @ 1,500'; ATTEMPT TO EST. INJ. RATE – PRES UP TO 1,000# X BLED DOWN SLOWLY; MIX X PUMP 30 SXS. CMT. @ 1,550' (PER OCD); PRES. UP ON CSG. TO 500#, CWI X WOC. 09/27/16: TAG TOP OF CMT. PLUG @ 1,348'; PERF. X CIRC. TO SURF., FILLING ALL ANNULI, 165 SXS. CMT. @ 355'-3'; DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULI; WELD ON STEEL PLATE TO CSGS. X INSTALL DRY HOLE MARKER. DURING THIS PROCEDURE WE USED THE CLOSED-LOOP SYSTEM W/ A STEEL TANK AND HAULED CONTENTS TO THE REQUIRED DISPOSAL, PER OCD RULE 19.15.17. Approved for Plugging of wellbore only. Liability under bond is retained pending restoration and completion of the C-103, Specific for Subsequent Report of Well Plugging, which may be found on the OCD web page under forms. I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE TITLE: AGENT DATE: 09/27/16 PHONE: 432.687.3033 For State Use Only APPROVED BY: Labeled La				CAG CMT PLUG @ 2 590'.	
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