

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
Saga Petroleum LLC

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

3b. Phone No. (include area code)
(915)684-4293

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1980' FSL & 660' FWL
Sec. 2 (T) T16S, R30E

5. Lease Serial No.
State E5131

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
Agreement 8910087730

8. Well Name and No.
West Henshaw Remier Unit Tr 15 #1

9. API Well No.
30-015-03818

10. Field and Pool, or Exploratory Area
Henshaw Grayburg

11. County or Parish, State
Eddy
NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Reactivate</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

2-11 thru 18 - 2002 PU on rods, Had PR & 1 pony rod, PU on tbq & POOH, rec 26 jts 1.9", PU rods & RIH, tag top of tbq @ 840', POOH w/rods. PU & RIH w/1.625" spear, catch fish, attempt to work tbq free. Pump FW dwn csg, loads w/1-1/2 BW, attempt to pump past bridge @ 500 psi, blow out WH pkg. POOH w/tbq to fish, have entire string of tbq, 90 jts, SN, orange peel BPMA. Install new 1.5" SN (1500'), RIH w/1.5" 10-V tbq (1520'), POOH, LD 39 jts - NU WH, PU & RIH w/150-125-12-4 pump. PU & RIH w/61 (1525') 5/8" sucker rods, 2', 4', 4', rod subs, 12' PR, hang on, space out. Wait on electrical power to be restored.

Well back on active producing status 2-21-02 - Reference is made to Violation Rule 201 - Inspection No. MLB 012485699

Originally filed w/ Artesia OCD office 3-26-02 on OCD Form C-103 as was an INC OCD Inspection -

Copy to Joe Lara Carlsbad BLM - Original to Roswell BLM

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

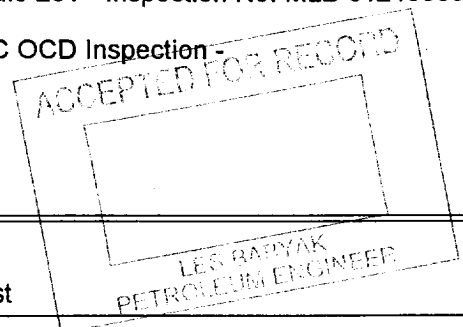
Bonnie Husband

Title
Production Analyst

Signature

Bonnie Husband

Date
10/31/2002



THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on reverse)

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

<p>WELL API NO. 30-015-03818</p>	
<p>5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/></p>	
<p>6. State Oil & Gas Lease No. E5131</p>	
<p>7. Lease Name or Unit Agreement Name W Henshaw Prem Unit Tract 15</p>	
<p>8. Well No. 1</p>	
<p>9. Pool name or Wildcat Henshaw Grayburg</p>	
<p>10. Elevation (Show whether DR, RKB, RT, GR, etc.) DF 3892'</p>	

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 Saga Petroleum LLC

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

4. Well Location

Unit Letter T : 1980 feet from the South line and 660 feet from the West line

Section 2 Township 16S Range 30E NMPM County Eddy

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 ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOBS ☐

OTHER: Re-activate ☒

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.

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Well back on active producing status 2-21-02 - Reference is made to Violation Rule 201 - Inspection No. MLB 012485699

COPY

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 03/26/2002

Type or print name Bonnie Husband

(This space for State use)

APPROVED BY _____ TITLE _____ DATE _____

Conditions of approval, if any:

