| 11213141576 | e *** | | هست. د | |
|--|---|---|--|---|
| UNITED STATES August 1999) 2002 DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT RECEIVED RECEIVED | | | FORM APPROVED OMB No. 1004-0135 Expires November 30, 2000 5. Lease Scrial No. | |
| | | | NM046615 | |
| OCD - ARTES ON USE THE | 5 0400 0 /45 | D) for an all by managed | s. | 6. If Indian, Allottee or Tribe Name |
| abandonad we aband | PLICATE - Other instr | uctions on reverse | side | 7. If Unit or CA/Agreement, Name and/or No. West Henshaw Premier Unit Tract 11 |
| 1. Type of Well Gas Well Other | | | | 8. Well Name and No. W Henshaw Premier Ut Tr 11 Well #4 |
| 2. Name of Operator Saga Petroleum LLC | | | | 9. API Well No. |
| 3a. Address 415 W Wall, Suite 1900, Midland, TX 79701 3b. Phone (915)68 | | | de area code) | 30-015-03856 10. Field and Pool, or Exploratory Area |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 2970' FSL & 2310' FWL Sec 4 (N), T16S, R30E | | | | West Henshaw Grayburg 11. County or Parish, State Eddy County NM |
| 12. CHECK AF | PROPRIATE BOX(ES) T | O INDICATE NATU | JRE OF NOTICE, F | REPORT, OR OTHER DATA |
| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
| X Notice of Intent | ☐ Acidize ☐ Alter Casing | ☐ Deepen☐ Fracture Treat | ☐ Production (Star ☐ Reclamation | rt/ Resume) |
| Subsequent Report | Casing RepairChange Plans | New Construction Plug and Abandon | Recomplete Temporarily Ab | Other |
| Final Abandonment Notice | Convert to Injection | ☐ Plug Back | Water Disposal | |
| If the proposal is to deepen direct Attach the Bond under which the | tionally or recomplete horizontall e work will be performed or provi lived operations. If the operation r I Abandonment Notices shall be f | y, give subsurface locations de the Bond No. on file with esults in a multiple completi | measured and true vertic BLM/BIA. Required sultion or recompletion in a n | proposed work and approximate duration thereof. cal depths of all pertinent markers and zones. absequent reports shall be filed within 30 days new interval, a Form 3160-4 shall be filed once n, have been completed, and the operator has |
| Reference is made to Not | ice of Written Order No. | 02JA126 - Carlsbad | Field Office 8-10- | -02 - James Amos |
| Good MIT ran 1-5-2001 P | ressure test to 560 psi - | Witness by G Hunt | of BLM | |
| Saga wants to hold this we | ellbore for future use in ' | WF pattern | | |
| | | | | |
| 14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Bonnie Husband Title Proc | | | uction Analyst | |
| Signature Conne Hurbard 11 | | | 1/2002 | |
| | THIS SPACE | FOR FEDERAL OR | STATE OFFICE U | SE |
| Approved by | | | Title | Date |
| Conditions of approval, if any, are certify that the applicant holds legal which would entitle the applicant to | or equitable title to those rights in | does not warrant or 1 the subject lease | Office | |
| | es it a crime for any person knowi | ngly and willfully to make to risdiction. | o any department or agenc | cy of the United States any false, fictitious or |

(Instructions on reverse)