

OCA - Artesi

c/s i

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

**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.*

5. Lease Serial No. LC067610

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.  
Agreement 8910087730  
West Henshaw Premier Unit Tract 4

8. Well Name and No.  
W Henshaw Premier Ut Tr 4 Well #4

9. API Well No.  
30-015-03852

10. Field and Pool, or Exploratory Area  
West Henshaw Grayburg

11. County or Parish, State  
Eddy County  
NM

**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' FEL  
Sec 4 (Q), T16S, R30E

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

TYPE OF SUBMISSION	3873				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 checked="" 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 type="checkbox"/> Other _____	
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input checked="" 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 recomple 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 recomple 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.)

1-5-2001 Pressure test to 530 -530 psi for 30 mins - good test - witness by G Hunt of BLM  
Chart & well bore diagram are attached

TA Approved For 12 Month Period  
Ending 1/5/2002

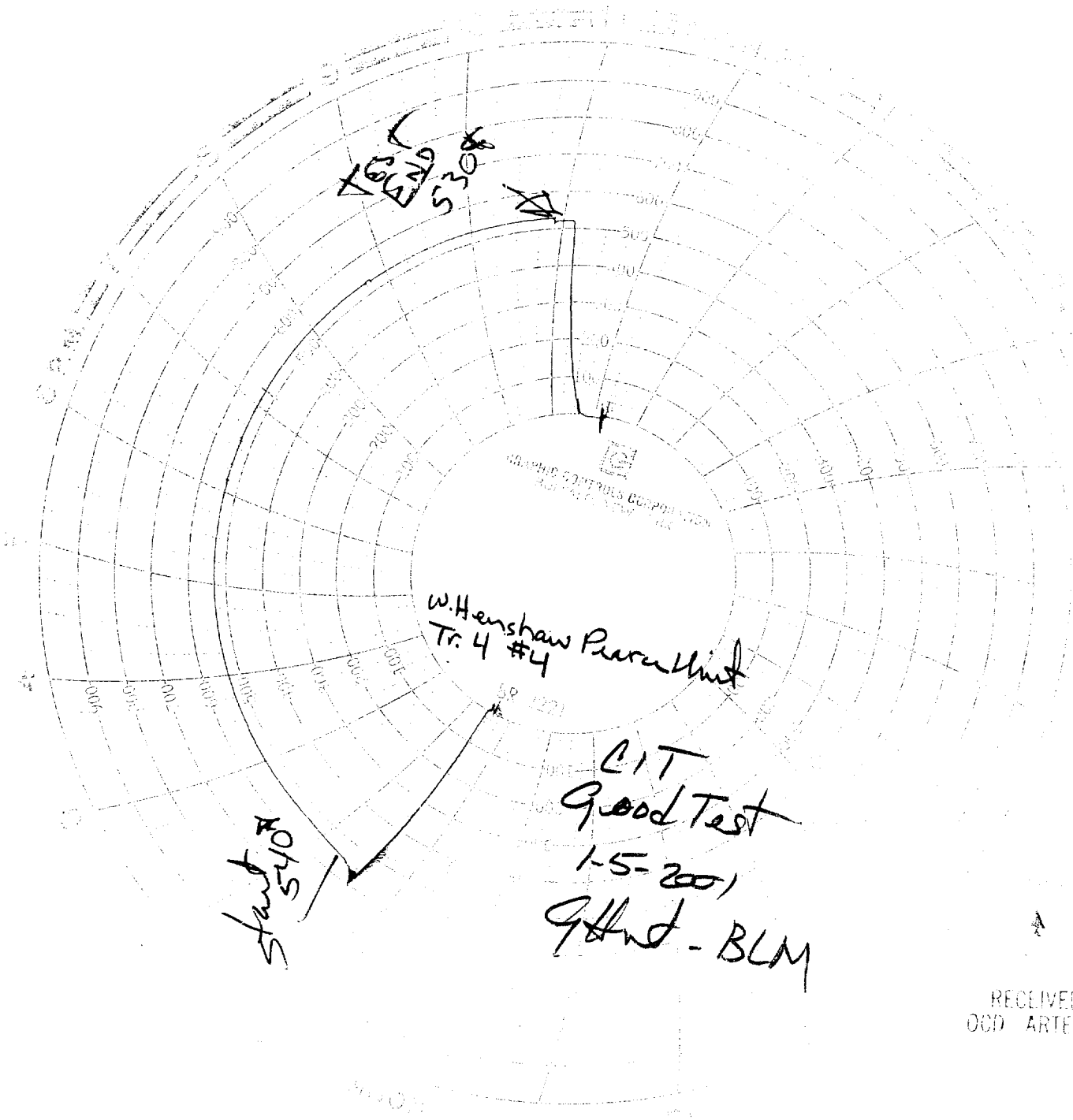
14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed) Bonnie Husband	Title Production Analyst
Signature <i>Bonnie Husband</i>	Date 01/10/2001

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by <i>[Signature]</i>	Title <i>[Signature]</i>	Date 2/2/2001
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 CFO

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.



TEST  
END  
5308

Start  
5408

W. Henshaw Parallel  
Tr. 4 #4

CIT  
Good Test  
1-5-2001  
GHD - BLM

RECEIVED  
OCD ARTESIA