Form 3160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

RECEIVED

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

5. Lease Serial No.

NM092190

SUNDRY NOTICES AND REPORTS ON WELLS	DEC 2/3 7003
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposed	OD ADTEOLA
shandoned well like Form 3160-3 (APD) for such proposed	GU-AHTESIA

6 If Indian Allottee or Tribe Name

abandoned w	rell. Use Form 3160-3 (APL)) for such prop	osas:D-ARTES	SIA O. II III.	n, Anottee of Tribe Name	
SUBMIT IN TRIPLICATE - Other instructions on reverse side 1. Type of Well					7. If Unit or CA/Agreement, Name and/or No.	
☐ Oil Well 🖾 Gas Well ☐ Other					8. Well Name and No.	
2. Name of Operator					Dero A Fed Com #1	
Saga Petroleum LLC 3a. Address 3b. Phone No. (include area code)					9. API Well No. 30-015-20304	
		(432)684-429			10. Field and Pool, or Exploratory Area	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				Winchester Morrow 11.* County or Parish, State		
660' FSL & 660' FEL Sec 35 (P) T19S, R28E				Eddy NM	Eddy	
12. CHECK AF	PPROPRIATE BOX(ES) TO) INDICATE N	ATURE OF NOTIO	CE, REPORT, C	OR OTHER DATA	
TYPE OF SUBMISSION			TYPE OF ACTION	1		
X Notice of Intent	☐ Acidize	☐ Deepen	☐ Production	(Start/Resume)	☐ Water Shut-Off	
X Subsequent Report	Alter Casing	Fracture Treat	Reclamati		 Well Integrity Other Recomplete to 	
X Subsequent Report	☐ Casing Repair ☐ Change Plans	☐ New Constructi ☐ Plug and Aband	-	e ly Abandon	Monther Recomplete to Bone Springs	
Final Abandonment Notice		☐ Plug Back	☐ Water Dis			
Attempted to TA - MIT fail Intend to pull csg & replace AFE to be prepared and concentration. Respectfully request Idle Well Inspection Inspection No: iGEGG Date Inspection: 9-2 Corrective Action Degerry Guye Inspector	te prior to attempting reco irculate to other WI owner to 60-day extension in Detail - Notice of 0326933403 26-03 ue by: 12-30-03	ompletion to Bors for approval	one Springs by pe	erforating 6920	rm. '-6940' & 5920' 5930'.	
14. I hereby certify that the foregoing Name (Printed/Typed) Bonnie Husband	g is true and correct	Titl Pr	e oduction Analyst			
Signature Bonnie Hu	stand	Dat 12	/18/2003			
		OR FEDERAL C	R STATE OFFICE	USE		
Approved by			Title		Date	
Conditions of approval, if any, are att certify that the applicant holds legal or which would entitle the applicant to co	equitable title to those rights in the		Office			
Title 18 U.S.C. Section 1001, makes i fraudulent statements or representation	it a crime for any person knowingly	and willfully to make	e to any department or a	gency of the United S	states any false, fictitious or	