

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 May 27, 2004

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO.	30 025 08288 ✓
5. Indicate Type of Lease	FEDERAL STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	NMLC-065880
7. Lease Name or Unit Agreement Name	North El Mar Unit ✓
8. Well Number	33 ✓
9. OGRID Number	20077
10. Pool name or Wildcat	El Mar (Delaware) ✓

**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 Service (injection)

2. Name of Operator  
 Sahara Operating Company ✓

3. Address of Operator  
 P.O. Box 4130, Midland, TX 79704

4. Well Location  
 Unit Letter P 660 feet from the South line and 660 feet from the East line  
 Section 26 Township 26S Range 33E 32 NMPM County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
 3,113 DF

Pit or Below-grade Tank Application  or Closure

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Well failed MIT on 10-22-2013. Tubing Leak. Well is shut in. Will repair and notify of retest.

**The Oil Conservation Division  
 MUST BE NOTIFIED 24 Hours  
 Prior to the beginning of operations**

**Condition of Approval: notify  
 OCD Hobbs office 24 hours  
 prior of running MIT Test & CHART.**

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE [Signature] TITLE President DATE 10-28-2013

Type or print name Robert McAlpine E-mail address: Rob@Saharaoper.com Telephone No. 432-697-0967

For State Use Only

APPROVED BY: Accepted for Record Only TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval (if any): MSB/11/21/2013

NOV 25 2013