

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

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

WELL API NO. 30-025-05394
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 306871
7. Lease Name or Unit Agreement Name D.E. Meyers
8. Well Number 1
9. OGRID Number 243978
10. Pool name or Wildcat Lovington Paddock, Tubb
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3798' - DF

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
Saber Oil & Gas Ventures, LLC

3. Address of Operator
400 W. Illinois, STE 950 Midland, TX 79701

4. Well Location
 Unit Letter L: 660 feet from the West line and 1980 feet from the South line
 Section 33 Township 16-S Range 37-E NMPM County LEA

HOBBS OCD
 DEC 16 2015
 RECEIVED

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

PEF	E-PERMITTING <SWD INJECTION>	SUBSEQUENT REPORT OF:	
TEM	CONVERSION _____ RBDMS _____	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PUL	RETURN TO _____ TA _____	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
DOI	CSNG _____ ENVIRO _____ CHG LOG _____	CASING/CEMENT JOB <input type="checkbox"/>	
CLC	INT TO PA _____ P&A NR _____ P&A R <u>RM</u>	OTHER: <input type="checkbox"/>	
OTHER:			

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Well has been P&A'd and location has been restored back to original state. Location is ready to be released.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE JTD Machenski TITLE Engineer DATE 12/14/15

Type or print name JTD Machenski E-mail address: jo@sbtorogv.com PHONE: 432 685 0169

APPROVED BY: Maude Whitaker TITLE Compliance Officer DATE 12/16/2015

Conditions of Approval (if any):

DEC 21 2015

RM