

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
 Revised March 25, 1999

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

WELL API NO. 30-025-08194	✓
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	✓
6. State Oil & Gas Lease No. E-5009	
7. Lease Name or Unit Agreement Name: Cotton Draw Unit	✓
7. Well No. 3	✓
9. Pool name or Wildcat Paduca 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: TA Injector

2. Name of Operator
 SAHARA OPERATING COMPANY ✓

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

4. Well Location
 Unit Letter H : 1980 feet from the North line and 660 feet from the East line ✓
 Section 16 Township 25-S Range 32-E NMPM County Lea

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3435' GR

HOBBS OCD
 APR 28 2016
 RECEIVED

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input 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"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: Return to Active Injector Status <input checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

12. 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 recompilation.

Intend to return well to active injection as follows:

1. Drill out cement and bridge plug @ 4582', push plug to bottom.
2. Run packer and lined tbg. Circ packer fluid and set packer.
3. Run MIT with OCD witness.
4. Resume active injection status.

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

SIGNATURE [Signature] TITLE President DATE 04-26-2016

Type or print name Robert McAlpine Telephone No. 915-697-0967

(This space for State use)

APPROVED BY [Signature] TITLE Petroleum Engineer DATE 05/06/16
 Conditions of approval, if any:

MAY 09 2016
 MAY 09 2016

ck