

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, Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103

Revised May 08, 2003

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

WELL API NO.	30-025-01566
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Cockburn B State	
8. Well Number	2
9. OGRID Number	
10. Pool name or Wildcat E K Yates 7 Rvrs Qn	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

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'd

2. Name of Operator
Saga Petroleum LLC

3. Address of Operator 415 W Wall, Suite 1900
Midland, TX 79701

4. Well Location

Unit Letter H : 1980 feet from the N line and 660 feet from the E line

Section 1 Township 18S Range 33E NMPM County Lea

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOBS ☐

OTHER: MIT - TA ☒

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

7-16-2003 Press up to 530 psi - held for 30 mins - good test witnessed by OCD's Robinson

Original chart attached

This Approval of Temporary
Abandonment Expires 7/23/08



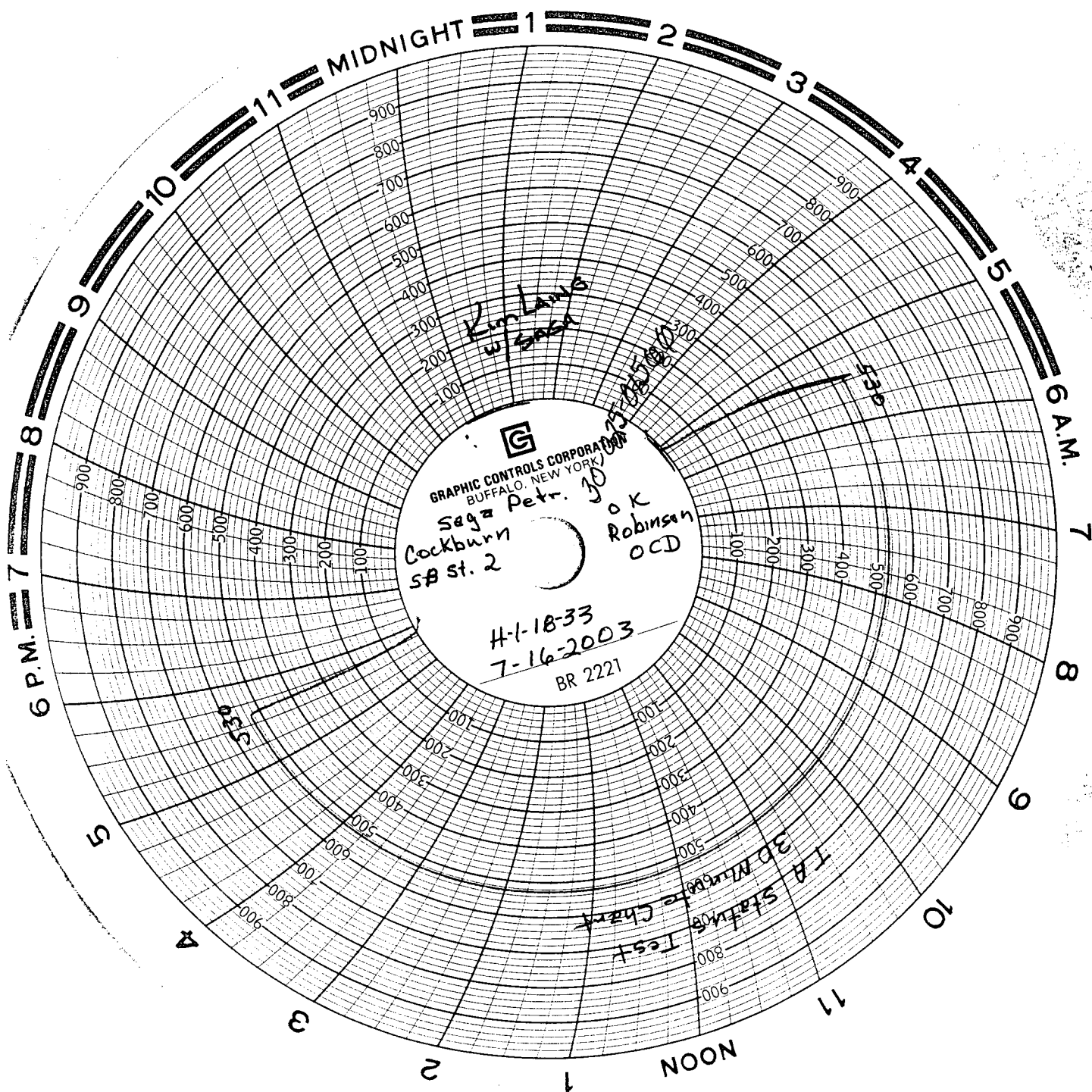
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Bonnie Husband TITLE Production Analyst DATE 07/21/2003

Type or print name Bonnie Husband Telephone No. (432)684-4293

(This space for State use)

APPROVED BY Hayward Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE JUL 23 2003
Conditions of approval, if any:



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

Sage Petr. JOK
Cockburn Robinson
58 St. 2 OCD

H-1-18-33
7-16-2003
BR 2221

Kuntz
w/ 58 St. 2

3D Mumble Chart
TA Status Test