

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

RECEIVED

AUG 08 2016

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: 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

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

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input checked="" type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOB <input type="checkbox"/></p> <p>OTHER: MIT test <input checked="" type="checkbox"/></p>
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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.

6/10-6/13-2016 Drilled out cement and bridge plug @ 4582', push plug to bottom.

6/16/2016 Run packer and 150 joints lined tbg. Circ packer fluid and set packer @ 4622'

6/29/2016 Run MIT with OCD witness. Held 600#/32 Min OK, witnessed by George Bower, copy attached

ok T. Pugh 4/6/16

Expect to resume active injection status on or before 8-10-2016

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

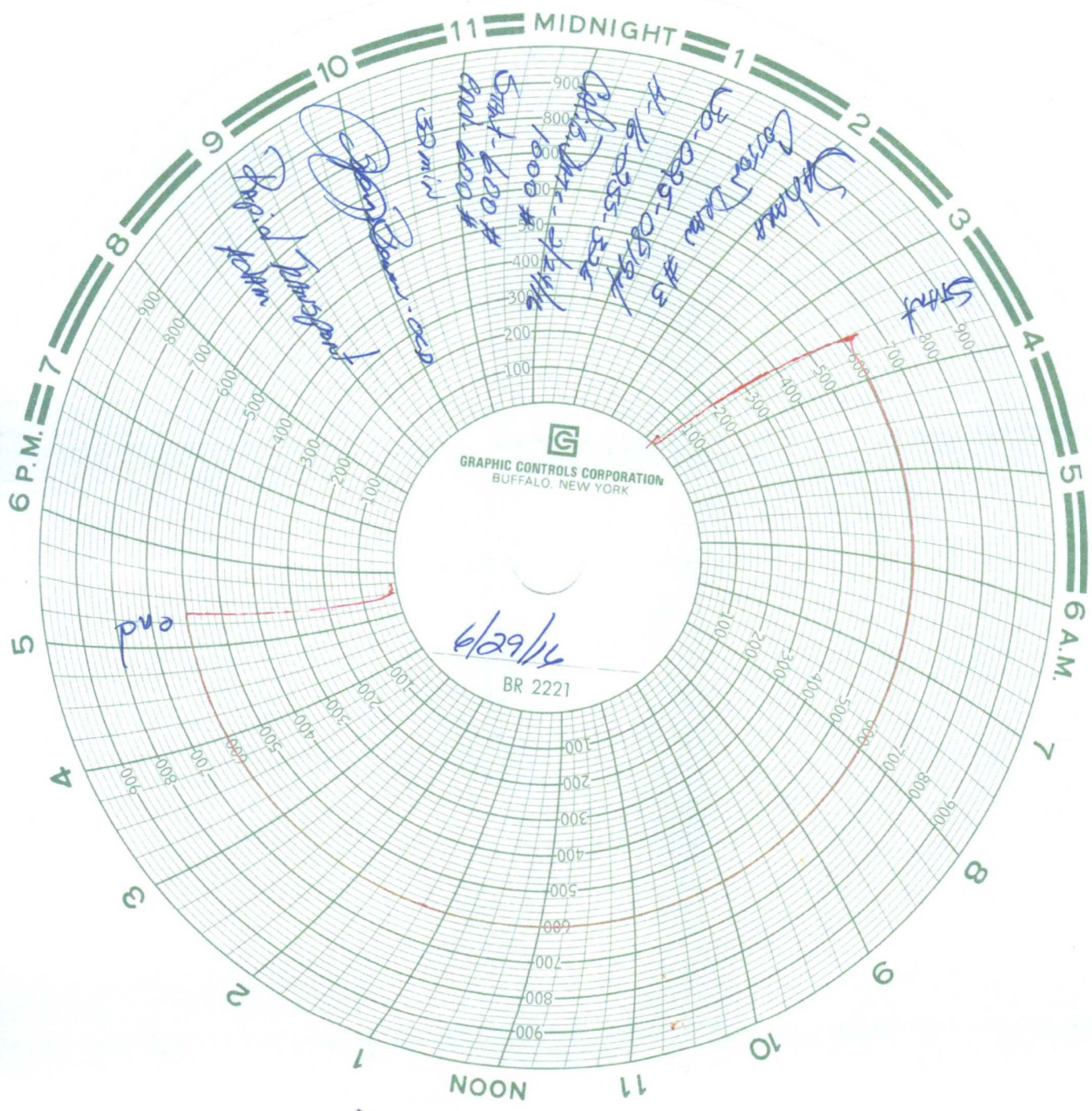
SIGNATURE [Signature] TITLE President DATE 08-03-2016

Type or print name Robert McAlpine rob@saharaoper.com Telephone No. 432-697-0967

(This space for State use)

APPROVED BY Mary Brawn TITLE Dist Supervisor DATE 8/10/2016

Conditions of approval, if any:



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