

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

Form C-103  
 May 27, 2004

**RECEIVED**

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-025-08318
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> TA		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>SAHARA OPERATING COMPANY</b>		6. State Oil & Gas Lease No. E-6622
3. Address of Operator P.O. Box 4130, Midland, TX 79704		7. Lease Name or Unit Agreement Name North El Mar Unit
4. Well Location Unit Letter <u>F</u> : <u>543</u> feet from the <u>South</u> line and <u>2108</u> feet from the <u>West</u> line Section <u>36</u> Township <u>26S</u> Range <u>32E</u> NMPM <u>Lea</u> County		8. Well Number <u>54</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number <u>020077</u>
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat El Mar (Delaware)
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> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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.

P&A'd Well as follows:

- 03/14/2019 Open well, TIH and tagged CIBP @ 4405', test casing to 500psi for 15 min OK. Circ well with 68 bbls mud laden fluid. Spot 25 sx 14.8#, 33 cu ft/Class C cmt 4405-4305'. WOC. TIH tag plug 4016'. POH, SIH w/pkr
- 03/15/2019 Perf 4 shots @ 3500'. POH w/WL. TIH w/pkr, att to pump in, press to 500#. Talk to OCD,(Kerry) TIH OE To 3550', mix and spot 25 sx 14.8#, 33 cu ft, Class C cmt, from 3550-3400'. POH. SDON.
- 03/18/2019 Open Well, TIH w/WL, perf 4 shots 2200'. Ran pkr, press 600 PSI. Called OCD (Kerry), approved 25 sx. Took off surface connections all the way to 8-5/8" WH, had cement all the way up. OCD approved no more perfing. mix and spot 25 sx 14.8#, 33 cu ft, Class C cmt @ 2250'-2100', mix and spot 25 sx 14.8#, 33 cu ft, Class C cmt 1250'-1100';
- 03/19/2019 TIH w/OE tbg, M&P 35 sx 14.8 # 46.2 cu ft cement from 460'-surface. Cut off wellhead, installed dry hole Marker. RDMO  
 WELL P & A

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 \_\_\_\_\_ TITLE President DATE 03-29-2019

Type or print name Robert McAlpine E-mail address: rob@saharaoper.com Telephone No. 432-697-0967  
**For State Use Only**

APPROVED BY: Kerry Forth TITLE Compliance Officer A DATE 4-8-19  
 Conditions of Approval (if any):