Submit 3 Copies To Appropriate District Office	State of New Mexico				Form C-103
District I	Energy, Minerals a	and Natu	ral Resources		May 27, 2004
1625 N. French Dr., Hobbs, NM 88240	-			WELL API NO. 30-025-05243	
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION			5. Indicate Type	of Leace
District III	1220 South St. Francis Dr.			STATE	FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	azos Rd., Aztec, NM 87410 Santa Fe, NM 87505			6. State Oil & C	
1220 S. St. Francis Dr., Santa Fe, NM				E-2504-4	
87505 SUNDRY NOTIC	ES AND REPORTS ON	WELLS		7. Lease Name	or Unit Agreement Name
(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.)				STATE H	
1. Type of Well: Oil Well Gas Well Other				8. Well Number 2	
2. Name of Operator				9. OGRID Number	
SABER RESOURCES, LLC				236378	
3. Address of Operator 400 W ILLINOIS, SUITE 950, MIDLAND, TX 79701				10. Pool name or Wildcat DENTON, WOLFCAMP	
4. Well Location				DEIVION, We	, El Crivii
Unit Letter H:	2210 feet from the	No	rth line a	nd 990 feet	t from the East line
Section 2			37E NMP		
	11. Elevation (Show who				
	3604' GL				
Pit or Below-grade Tank Application or o	Closure 🗌				
Pit typeDepth to Groundwate	erDistance from near	rest fresh w	ater well Dis	tance from nearest su	rface water
Pit Liner Thickness: mil	Below-Grade Tank: Volu	ume	bbls; C	onstruction Material	
12. Check Ap	opropriate Box to Inc	licate N	ature of Notice,	Report or Othe	r Data
NOTICE OF INT	ENTION TO:		l SHE	SEQUENT RE	EDORT OF:
NOTICE OF INTENTION TO: SUB PERFORM REMEDIAL WORK ☑ PLUG AND ABANDON ☐ REMEDIAL WOR					ALTERING CASING
					P AND A
<del>-</del>	MULTIPLE COMPL		CASING/CEMEN		
		_	071150		
OTHER:  13. Describe proposed or comple	ted operations (Clearly	state all r	OTHER:	d give pertinent da	tes including estimated date
of starting any proposed work or recompletion.					
	oduction equipment from on. Fluid will be circulat				
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					7110168 L9G
I hereby certify that the information ab	ove is true and complete	to the be	est of my knowledg	e and belief. I furt	her certify that any pit or below-
grade tank has been/will be constructed or cle				or an (attached) alter	native OCD-approved plan .
SIGNATURE Runs M	<i>////</i> 1 <sub>т</sub>	TTI E. V	ice President of Or	perations DATE: 1	/4/07
Douglas Keathley	·	IILL. V	ice i resident of Op	Ciations DATE. I	74707
_ = == <b>_</b>	E -mail a	address:	doug@saberresour	ces.com Telep	hone No. 432-685-0169
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For State Use Only	, , , 1				
APPROVED BY: Haul	1. Wink I	TELE.	ens have a		DATE
Conditions of Approval (if any):	•	OC FIEL	D REPRESENDATI	VE I/STAFF LIVE	
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