Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
H	nergy, Minerals and Natural Resources	May 27, 2004
District I 1625 N. French Dr., Hobbs, NM 882	VEN	WELL API NO.
	111 TOWNSOLOD V/ A THANK LINEVICAN	30-025-30493 5. Indicate Type of Lease
1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV	7004220 South St. Francis Dr.	STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
District IV 1220 S. St. Francis Dr., Santa Fe, NMHOBBS	JCD /	o. State on te das Bease 140.
87505	ALD DEDODES ON MEDICA	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION		Bear
PROPOSALS.)		8. Well Number #1
	ell Other	
2. Name of Operator Sagebrush Oil and Gas Company LLC		9. OGRID Number 243978
3. Address of Operator		10. Pool name or Wildcat
400 W Illinois, Suite 950, Midland, Texas 79701		Bixhop Canyon, San Andres, East
	77701	Birnop Curryon, Sun Finances, East
4. Well Location		
Unit Letter F: 1980	feet from theNorth line and198	
Section 11 Township		NMPM Lea County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
Pit or Below-grade Tank Application or Closure	3636' GL	
		
	Distance from nearest fresh water well Dis	
Pit Liner Thickness: mil Bel	ow-Grade Tank: Volume bbls; C	Construction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENT	CONTO	OF OUR DEPORT OF
NOTICE OF INTENT		BSEQUENT REPORT OF:
	S AND ABANDON REMEDIAL WOF	
	-	RILLING OPNS. P AND A
PULL OR ALTER CASING	TIPLE COMPL	IT JOB 🔲
OTHER: Return to production	OTHER:	
	J OTTLEN	
		nd 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.		
Figh stuck packer from well and ret	um to production	
Fish stuck packer from well and return to production		
I hereby certify that the information above is	true and complete to the best of my knowledg	ge and belief. I further certify that any pit or below-
grade tank has been/will be constructed or closed acc	cording to NMOCD guidelines , a general permit	or an (attached) alternative OCD-approved plan [].
SIGNATURE A COMPANY	TITLE VP of Finance	DATE 2/11/09
SIGNITIONS TO STATE OF THE STAT	VA OUZ MAINE	
Type or print name: Paula Dillard E-mail	address: paula@saberresources.com Telep	phone No. 432-685-0169
For State Use Only	·	
13.4	PETROL EUM E	NGINEER FEB 1 9 2009
APPROVED BY:	TITLE	DATE
Conditions of Approval (if any):	,	
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