

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD-10000  
**RECEIVED**  
SEP 16 2009  
HOBBSOCD

FORM APPROVED  
OMB No 1004-0135  
Expires November 30, 2000

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals*

**SUBMIT IN TRIPLICATE - Other Instructions on reverse side**

1	Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Service (Injection)
2	Name of Operator Sahara Operating Company
3a	Address P O Box 4130, Midland, TX 79704
3b	Phone No. (include area code) 432/697-0967
4	Location of Well (Footage, Sec, T, R, M, or Survey Description) 660' FSL & 660' FEL, Sec 24, T26S, R32E, NMPM, Unit Letter "P"

5	Lease Serial No NMLC-065876A
6	If Indian, Allottee or Tribe Name
7	If Unit or CA/Agreement, Name and/or No North El Mar Unit NM 70994X
8	Well Name and No. North El Mar Unit #2
9	API Well No. 30 025 08269
10	Field and Pool, or Exploratory Area El Mar (Delaware)
11	County or Parish, State Lea County, N.M.

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treatment	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13 Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomple horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recomple in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Plugged well as follows:

7-13-2009 MIRU Mayo-Marrs, RIH w/tbg, tag CIBP @ 4650'  
Circulate plugging mud  
Spot 25 sx cement on CIPB @ 4650', POH. SDON

7-14-2009 RIH Perf 1100' and squeezed 30 sx. POH, WOC.  
RIH and Tag 1065'. - *Should have Perforated again, squeezed*  
Spotted 25 sx on plug @ 1065' *additional cmt.*  
RIH & Perf 365' and circulate 116 sx to surface  
Rig down, dig out and cut off wellhead  
Install dry hole marker, clean location, move out

*\* Well Plugged w/o OCD notice!*

14 I hereby certify that the foregoing is true and correct  
Name (Printed/Typed)

Robert McAlpine

Title President

Signature

Date 8/25/2009

**ACCEPTED FOR RECORD**

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

SEP 5 2009

Approved by

Title

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE