Submit 3 Copies to Appropriate District Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

WELL API NO. 30-025-22303

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name: Crossroads Devonian / Siluro

1. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER SWD

8. Well No. 306

2. Name of Operator: Saga Petroleum, LLC

9. Pool name or Wildcat: Crossroads Devonian

3. Address of Operator: 415 W. Wall, Suite 1900, Midland, TX 79701

4. Well Location
Unit Letter O : 990 Feet From The South Line and 1650 Feet From The East Line

Section 27 Township 9S Range 36E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☒
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: ☐		OTHER: ☐	

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.

8/07/01 Set 8-5/8" pkr. @ 770', sqz w/ 800 sx "C" cmt. and pressure up to 1200 PSI, displaced TOC to 830', shut well in. WOC.
8/08/01 Pressure test under pkr. to 1200 PSI and held. Tag TOC @ 810'.
8/08/01 Fill 8-5/8" csg. to Surface from 810' w/ 215 sx "C" cmt.
8/14/01 Cut off wellhead and weld on steel plate w/ dry hole marker.

Approved as to Plugging of the Well Bore.
Liability under bond is retained until
Surface restoration is completed.

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

SIGNATURE [signature] TITLE Agent DATE 8/15/01

TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY GARY W. WINK OC FIELD REPRESENTATIVE II/STAFF MANAGER TITLE DATE DEC 13 2002

GW