

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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

OIL CONSERVATION DIVISION  
2040 Pacheco St.  
Santa Fe, NM 87505

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

U.D. Sawyer

1. Type of Well:

OIL  
WELL ☐

GAS  
WELL ☐

X OTHER SWD

2. Name of Operator

Saga Petroleum Limited Liability Co of Colorado

8. Well No.

06

3. Address of Operator

415 W. Wall, Ste. 835, Midland, TX 79701

9. Pool name or Wildcat

Crossroads Siluro Devonian

4. Well Location

Unit Letter 0 : 990 Feet From The South Line and 1650 Feet From The East Line

27 Section 9S Township 36E Range 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:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

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.

SEE ATTACHED CHART

Results: Held 340 for 30 mins. District was notified but test was not witnessed.  
Test was on February 13, 1998. The first date of injection was 2/18/98  
on vacuum.

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

SIGNATURE

Chris Hodge

Production Analyst

DATE

3/11/98

TYPE OR PRINT NAME

Chris Hodge

TELEPHONE NO. 915/684-4293

(This space for State Use)

ORIGINAL SIGNED BY CHRIS WILLIAMS  
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: