

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised March 25, 1999

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

WELL API NO.	30-025-28836
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Crossroads Siluro Dev	
8. Well No. 311	
9. Pool name or Wildcat SWD Devonian	

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.)

1. Type of Well:
Oil Well ☐ Gas Well ☐ Other SWD

2. Name of Operator
Saga Petroleum LLC

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

4. Well Location
Unit Letter J : 2561 feet from the SOUTH line and 1610 feet from the EAST line
Section 27 Township 9S Range 36E NMPM County LEA

10. Elevation (Show whether DR, 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 <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE <input type="checkbox"/>	CASING TEST AND <input type="checkbox"/>
COMPLETION	CEMENT JOBS
OTHER: <input type="checkbox"/>	OTHER: P&A <input checked="" type="checkbox"/>

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work). SEE RULE 1103. For Multiple Completions: Attach diagram of proposed completion or recompletion.

Well P&A'd May 2001 - location restored & ready for final inspection

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

SIGNATURE Bonnie Husband TITLE Production Analyst DATE 01/16/2003

Type or print name Bonnie Husband

Telephone No. (915)684-4239

(This space for State use)

APPROVED BY _____ DATE JAN 22 2003

Conditions of approval, if any:

ORIGINAL SIGNED BY
GARY W. WINK
TITLE
OC FIELD REPRESENTATIVE II/STAFF MANAGER