## State of New Mexico En., gy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

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

OIL CONSERVATION DIVISION WELLAPING

DISTRICT II  P.O. Drower DD Asteric NM 99210  Santa Fe, New Mexical Santa Fe, New Mexica	
P.O. Drawer DD, Artesia, NM 88210	5. Indicate Type of Lease
<u>DISTRICT III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	STATE X FEE
2000 200 200 200 200 200 200 200 200 20	6. State Oil & Gas Lease No. E8948
SUNDRY NOTICES AND REPORTS ON W	ELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  7. Lease Name or Unit Agreement Name	
(FORM C-101) FOR SUCH PROPOSALS.)	Todd Lwr SA Unit Sec. 31
1. Type of Well: OIL WELL GAS WELL OTHER WIW	
2. Name of Operator Saga Petroleum LLC	8. Well No.
3. Address of Operator	9. Pool name or Wildcat
415 W Wall, Suite 1900, Midland, TX 79701	Todd Lower San Andres Assoc
4. Well Location Unit Letter C:330 Feet From The N	Line and 1650 Feet From The W Line
Section 31 Township 7S Range 36E, NMPM ROOSEVELT 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 X	REMEDIAL WORK ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG AND ABANDON
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.	
Set CIBP @ 4234', dump 35' cmt on top (perfs 4257'-4302') Tag	
100' plug @ 2035'-1935' Cut & pull 5-1/2" csg, approx 1000'	
Spot 100' plug @ 5-1/2" stub, Tag	
Spot 100' plug @ 8-5/8" shoe (50 in & 50 out) Btm of shoe @ 331', Tag 50' surface plug, install dry hole marker	
50' surface plug, install dry hole marker	. 9
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE BONNIU BUSTIANO TIT	LE Production Analyst DATE 09/15/2000
TYPE OR PRINT NAME Bonnie Husband  TELEPHONE NO. (915)684-4293	
(This space for State Use)	
(	그리는 사용하는 하는 이 첫호와 영상 
APPROVED BYTTT	•