

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil Co.  
P.O. Box 1980  
Hobbs, NM 88240

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well  
☐ Oil Well ☐ Gas Well ☒ Other

2. Name of Operator

Saga Petroleum Limited Liability Company of Colorado

3. Address and Telephone No.

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

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SENE Sec. 25, 35E, 7S

5. Lease Designation and Serial No.

NMNM071050

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

TLSAU 25-8

9. API Well No.

30-041-10585

10. Field and Pool, or Exploratory Area

Todd Lwr S/A Assoc

11. County or Parish, State

Roosevelt, NM

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

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

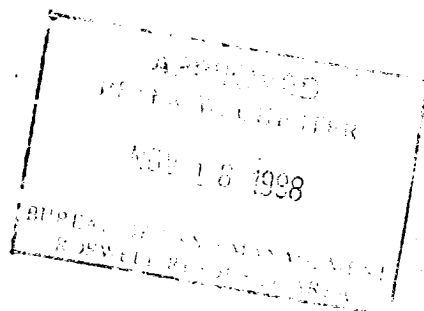
- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other Shut in/TA  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Requesting a 30-day shut in for evaluation of Temporarily Abandonment

- This well is an injection well which has not been used since we took over operations. In the next 30-days we plan to evaluate this well. Future plans are to use this well to enhance waterflood operations.

- We will mail an outline of the results of the evaluation to your office at the end of the 30-days.



14. I hereby certify that the foregoing is true and correct

Signed

Title Production Analyst

Date 11/03/98

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date