Submit 3 Copies to Appropriate District Offices

State of New Mexico Ene. ,y, Minerals and Natural Resources Department

Form C-103

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

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION

Revised 1-1-89

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 310 Old Santa Fe Trail, Room 206 Santa Fe, New Mexico 87503		WELL API NO.	-	
		30-041-20078	_]	
		5. Indicate Type of Lease	T	
<u>DISTRICT III</u> 1000 Rio Brazos Rd., Aztec, NM 87410		STATE X FEE		
		6. State Oil & Gas Lease No.	T	
			OG174	4
l .	CES AND REPORTS ON W			
(DO NOT USE THIS FORM FOR PRO	POSALS TO DRILL OR TO DEEPE OIR. USE "APPLICATION FOR PE		7. Lease Name or Unit Agreement Name	Ī
	101) FOR SUCH PROPOSALS.)		Todd Lwr SA Unit Sec. 31	
1. Type of Well:				
OIL WELL GAS WELL	OTHER			
2. Name of Operator			8. Well No.	†
Saga Petroleum LLC			9	+
3. Address of Operator 415 W Wall, Suite 1900, Midland	TX 79701		9. Pool name or Wildcat Todd Lower San Andres Assoc	
	1 17 19101		TOGU LOWEL SAIL AHUTES ASSOC	+
4. Well Location Unit Letter 1 :2180	Feet From The S	Line and 660	Feet From The E Line	
Section 31	Township 7S R	ange 36E N	NMPM ROOSEVELT County	
	10. Elevation (Show whe	ether DF, RKB, RT, GR, etc.)		1
				\perp
	propriate Box to Indicate N	lature of Notice, Repo	ort, or Other Data	
NOTICE OF INTI	ENTION TO:	SUBS	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDON	
PULL OR ALTER CASING		CASING TEST AND CEM	MENT JOB	
OTHER:		OTHER:		
	otions (Clarabatatatatata		des including administration of the control of the	_
 Describe Proposed or Completed Operawork) SEE RULE 1103. 	_		tes, including estimated date of starting any proposed	
Set CIBP @ 4200', dump 35' cmt on top (perfs 4282'-4317') Tag 100' plug @ 2035'-1935' Cut & pull 5-1/2" csg, estimate 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				
ou surface plug, install dry note m	iai NCI			
	1			_
I hereby certify that the information above is true				
SIGNATURE Sonne	LOUANO TI	TLE Production Analyst	DATE 09/15/2000	
TYPE OR PRINT NAME Bonnie Husban	d		TELEPHONE NO. (915)684-4293	
CONTRACTOR OF THE PROPERTY OF			, but	=
(This space for State Use)		The second second		
APPROVED BY		TLE	DATE	
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