

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

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30 025 24372

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.)

1. Type of Well:
OIL WELL ☐ GAS WELL ☐ OTHER Re-Entry

2. Name of Operator
SAGE ENERGY COMPANY

3. Address of Operator
P. O. Drawer 3068, Midland, Texas 79702

4. Well Location
Unit Letter FE : 2080 Feet From The North Line and 560 Feet From The West Line

Section 29 Township 14S Range 34E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

4139' GL

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: Completed as ~~SD~~ well ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: K-8505A ☒

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.

3-27-90 Released RITS and install BOP, POH with tubing and laid down packer, PU 4½" x 2 3/8" 4.7# N-80 tubing, set packer at 10,367.91' KB (15' KB) with 16 points. Remove BOP and flanged up well head, load annulus with 2% KCL water with packer fluid. Pressure to 500#s, held OK, RD, waiting on unjection line. Bottom hole location is 1606.55' from the North line and 542.29' from the West line of Section. Final Report.

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

SIGNATURE Frances Holzgraf TITLE Production Clerk DATE 4-4-90

TYPE OR PRINT NAME Frances Holzgraf AC 915 TELEPHONE NO. 683 5271

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE APR 13 1990

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

APR 12 1990

OLD
HOBBS OFFICE