orbinit 3 Copies, To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources			Form C-103 Revised March 25, 1999	
District I 625 N. Trench Dr., Hobbs, NM 87246 District II			WELL API NO.	30-025-03039	
311 South En at Artesia, NM 87219 District III 900 Rio Brazos Rd., Aztec, NM 87410 District IX 940 South Pacheco, Santa Fe, NM 87505	2040 South Pachec	OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505		5. Indicate Type of Lease STATE FEE X 6. State Oil & Gas Lease No.	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USL THIS FORM FOR PROPOSALS TO DRILL, OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Oil Well X Gas Well Other			7. Lease Name or U George McGonagi	Jnit Agreement Name Il	
2. Name of Operator Saga Petroleum LLC			8. Well No. 1		
3. Address of Operator 415 W. Wall, Suite 1900 Midland, TX 79701			Pool name or Wildcat Vac Grayburg San Andres		
				!	
Unit Letter A : 3	feet from the NORTH	line and <u>990</u>	feet from	the EAST line	
Section 2		ange 35E	NMPM	CountyLEA	
	10. Elevation (Show whether DR, 3891Gr 3904' DF				
11. Check Aţ NOTICE OF IN¹ ERFORM REMEDIAL WORK □			SEQUENT REP		
EMPORARILY ABANDON [] CHANGE PLANS [] COMMENCE DR				PLUG AND ABANDONMENT	
ULL OR ALTER CASING []	MULTIPLE COMPLETION	CASING TEST AND CEMENT JOBS			
THER:		IONS OF APPRO			
2. Describe proposed :: complete of starting and proposed work) or recompletion. 17" hole. 13-3/8" 48# csg @ 320' v 11" hole. 8-5/8" 24 & 32# csg @ 37-7/8" hole. 5-1/2" 15.5 & 17# csg CIBP a 4970' w/2sx cmt & CIBP	All shoe plus tagged w/330 sx - circ All cement 498' w/1365 sx - circ @ 9259' w/720 sx - TOC 3500' by	plugs pumped min	ment plug s above per imum 25 sxs & be mir	nimum 100 feet	
tet 5-1/2" CIBP \hat{q} , 4750' - dump 3 (pot 100' plug from 3548'-3448' (5) (pot 100' plug from 370'-270' (50' 5 sx plug 50' \hat{q} , surface w/dry hole \Rightarrow 5 POT 100' PLUG	'0' in & 50' out), tag in & 50' out), tag).s.)			
	THE COMMISSION MUS HOURS PRIOR TO THE PLUTIGING OPERATION TO BE APPROVED.	: SEGINNINI - OF			
hereby certify that the information	11 0 a	e best of my knowle		DATE 02/12/2002	
,		_ rounditon : mmj st			
Type or print nameBonnie Husban This space for State use)	a On'Canada		reiepr	none No. (915)684-4293	
APPROVED BY	GALLAND OK THERITTLE			DA FEB 2 1 2002	
Conditions of approval, if any:		<u> </u>		DATEB 2 1 2002	

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