

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.  
30-025-25005

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
K-5029

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.)

7. Lease Name or Unit Agreement Name

NVANU "19"

1. Type of Well:  
OIL WELL ☐ GAS WELL ☐ OTHER Injector

8. Well No.  
1

2. Name of Operator  
SAGE ENERGY COMPANY

9. Pool name or Wildcat  
North Vacuum (Abo) ~~North~~

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

4. Well Location  
Unit Letter H : 460 Feet From The East Line and 1980 Feet From The North Line  
Section 2 Township 17-S Range 34-E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
4045.3 GL

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 ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: CONVERT TO AN INJECTION WELL ☒

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
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.

Convert producing well "19" #1 to a water injection well by running 2-3/8" tubing on a Baker Lok-set packer at 8650'. Annulus to be filled with corrosion protective water and pressure tested. Work to commence on September 23, 1993.

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

SIGNATURE Tonya Streun TITLE Production Clerk DATE 9-21-93  
TYPE OR PRINT NAME Tonya Streun (915) 683-5271  
TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE SEP 23 1993

CONDITIONS OF APPROVAL, IF ANY:

**RECEIVED**

**SEP 22 1993**

**CCD HOBBS  
OFFICE**