Submit 3 Copies to Appropriate	State of N	New Mexico	Form C-103
District Office	Lifetgy, Militerals and Na	tural Resources Department	Revised 1-1-89
<u>DISTRICT I</u> P.O. Box 1980, Hobba, NM 88240	OIL CONSERVA	ATION DIVISION	WELL API NO.
P.O. Box 2088 P.O. Drawer DD, Artesia, NM 88210 P.O. Drawer DD, Artesia, NM 88210 P.O. Box 2088 Santa Fe, New Mexico 87504-2088		30-025-25207	
DISTRICT HI	·	2000	5. Indicate Type of Lease STATE X FEE
1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas Lease No. B-2244
SUNDRY NOT	ICES AND REPORTS OF	N WELLS	
(DO NOT USE THIS FORM FOR PRODIFFERENT RESE	OPOSALS TO DRILL OR TO D RVOIR. USE "APPLICATION F C-101) FOR SUCH PROPOSALI	OR PERMIT	7. Lease Name or Unit Agreement Name
1. Type of Well:	111/10/10/10/10/10/10/10/10/10/10/10/10/	<u>., </u>	North Vacuum Abo North
OIL X GAS WELL	OTHER		Unit 14
2 Name of Operator			8. Well No.
Sage Energy Comp. 3. Address of Operator	<u>any</u>		#3
P.O. Drawer 3068	Midland, Te	exas 79702	9. Pool name or Wildcat
4. Well Location			Vacuum Abo North
	80 Feet From The North	Line and 660	Feet From The West Line
Section 12	Township 17-S	Range 34-E	NMPM Lea Communication
		whether DF, RKB, RT, GR, etc.)	NMFM Led County
II. Check	4030.1		
NOTICE OF INT	Appropriate Box to Indi	icate Nature of Notice, Re	
NOTICE OF INT	ENTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	
PULL OR ALTER CASING	_	CASING TEST AND CE	TO THE MOMINE MENT
OTHER:		OTHER: Requ	esting TA'D Status
12. Describe Proceed or Completed Open	tions (Claude and III at a land	[
 Describe Proposed or Completed Operat work) SEE RULE 1103. 		tails, and give pertinent dates, includ	ing estimated date of starting any proposed
one jo water TA'D.	oin t sto 8461' KE and packer flui	on tubing, set at 3, circulate hole d, POH and laid) psi for 30 minu	down tubing. Well
		(his Approvi	il of Terrors 2-4-2009 Expires
Therefore certify that the information ob-			
I heroby certify that the information above is true	<i>l</i> ≠		
TYPE OR PRINT NAME TONYA ST		_ mme Production	Clerk 3-4-97 (915) 683-5271
TOTTY DE	. L CUII		TELEPHONE NO.
(This spince for State Use)	•		MAR 0 6 1997
APPROVED BY		- mue	DATE

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