

UNITED STATES **N.M. Oil Cons. Div.**
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
1625 N. French Dr.
Hobbs, NM 88240

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Lease Serial No. NMLC 029489B
2. Name of Operator Saga Petroleum LLC		6. If Indian, Allottee or Tribe Name
3a. Address 415 W Wall, Suite 1900, Midland, TX 79701	3b. Phone No. (include area code) (915)684-4293	7. If Unit or CA/Agreement, Name and/or No. NMNM84603X
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FSL & 660' FEL SEC 4 (I), T18S, R33E		8. Well Name and No. Central Corbin Queen Unit #204
		9. API Well No. 30-025-29738
		10. Field and Pool, or Exploratory Area CORBIN QUEEN CENTRAL
		11. County or Parish, State LEA NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input checked="" type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Return to inj</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

10-16-02 Communicated

10-31-02 NDWH, work to release pkr, get pkr loose, POOH w/tbg & pkr, mandrel on pkr flattened, PU new pkr, TIH w/same, NUWH, circ pkr fluid, NDWH, set 2-3/8" x 5-1/2" AD-1 pkr @ 4120' w/16K tension, load & test csg & pkr - both test good, return well to inj - (130 jts 4118' 2-3/8" cmt lined tbg)

11-05-02 NDWH, can't get pkr loose, wait on pkr hand, release pkr, POOH, HIT jt #77, LD bad jt, continue to POOH, LD pkr, bullplug tbg. Test tbg every 10 stds to 2000 psi, no failures. POOH w/tbg & SDFN

11-06-02 PU 2-3/8" x 5-1/2" AD-1 pkr & RIH w/pkr & tbg, NU WH, circ pkr fluid, ND WH, set pkr @ 4120' w/16K tension, NU WH, test csg - test good, RDSU, put well back on injection.

11-08-02 Press test ran 11-5-02 - Press up to 520 psi - held for 30 mins - good test - well returned to active injection status

Copy chart on back of form - original chart to Hobbs OCD w/copy this form

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed)

Bonnie Husband

Title

Production Analyst

Signature

Bonnie Husband

Date

01/13/2003

ACCEPTED FOR RECORDS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

(ORIG. SGD.) DAVID R. GLASS

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on reverse)

