

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**  
310 Old Santa Fe Trail, Room 206  
Santa Fe, New Mexico 87503

WELL API NO.

30-025-33432

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

V-4338

7. Lease Name or Unit Agreement Name

State Sims "31"

8. Well No.

1

9. Pool name or Wildcat

Eumon# (Y-SR-QN)

**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 Dry Hole

2. Name of Operator

Sahara Operating Company

3. Address of Operator

P. O. Box 10280, Midland, TX 79702

4. Well Location

Unit Letter K : 1600 Feet From The South Line and 1800 Feet From The West Line

Section 31 Township 20-S Range 36-E NMPM Lea County

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

3644' GR

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: ☐

**SUBSEQUENT REPORT OF:**

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.

05/21/96 Obtained plugging procedure from Jerry Sexton, NM OCD (Hobbs). LDDC's. TIH w/ OEDP and RU cementers. Layed 35 sx plug btm 3738', LDDP, layed 35 sx plug btm 3570', LDDP, layed 35 sx plug btm 1442'. WOC 4 hrs. RIH tagged plug @ 1338'. LDDP, ND WH, set 10 sx plug @ surface.

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

SIGNATURE Celeste A. Dale TITLE Agent DATE 05/22/96

TYPE OR PRINT NAME Celeste G. Dale TELEPHONE NO. (915) 687-4220

(This space for State Use)

APPROVED BY Johnny Robinson TITLE COMPLIANCE OFFICER DATE FEB 04 2003

CONDITIONS OF APPROVAL, IF ANY