Submit 3 Copies To Appropriate District Office	State of New Mexico				Form C-103	
District 1	Energy, Minerals and Natural Resources				Revised March 25, 1999	
1625 N. French Dr., Hobbs, NM 88240				WELL API NO	:	
District II 1301 W. Grand Ave., Artesia, NM 88210	ia. NM 88210 OIL CONSERVATION DIVISION			30-025-0		
District III	1220 South St. Francis Dr				e of Lease FEDERAL	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505			STATE 6. State Oil &	Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM						
SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Name or Unit Agreement Name:		
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				7. Lease Name	or Unit Agreement Name:	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)				Cotton D	raw Unit	
1. Type of Well:						
Oil Well Gas Well Other: Injector						
2. Name of Operator				7. Well No.		
SAHARA OPERATING COMPANY				11		
3. Address of Operator				9. Pool name or Wildcat		
P.O. BOX 4130, Midland, TX 79704 4. Well Location				Paduca (Delaware)		
4. Well Location			•			
Unit Letter N :	660 feet from the	SOUTH	line and 198	80 feet from	n the <u>West</u> line	
		<u> </u>	mic and	ieet iioii	ine <u>west</u> ine	
Section 15	Township		Range 32-E	NMPM	County Lea	
10. Elevation (Show whether DR, RKB, RT, GR, etc.)						
11 (1 1)	3428' DF					
11. Check A	ppropriate Box to In	dicate N	ature of Notice,	Report or Other	r Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:						
PERFORM REMEDIAL WORK ☑ PLUG AND ABANDON ☐ REMEDIAL WORK				K ☐ ALTERING CASING ☐		
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ PLUG AND						
-	011/11/0E1 B1140		COMMENCE DRIE	CASING TEST AND		
PULL OR ALTER CASING	MULTIPLE					
	COMPLETION		CEMENT JOB			
OTHER:			OTHER:		П	
12. Describe proposed or completed	operations. (Clearly sta	te all pert	inent details, and give	e nertinent dates	including estimated data of	
starting any proposed work). SEI	E RULE 1103. For Mult	tiple Com	pletions: Attach wel	llbore diagram of	proposed completion or	
recompilation.	•	-	•	<i>5</i> ,	e e e e e e e e e e e e e e e e e e e	
Propose to repair casing & resu	me active injector sta	atus on v	well.			
				•	•	
1. Reinstall well sign.	Rig up, NU BOP. Ri	ın packe	r & bridge plug.	Locate casing 1	eak.	
2. Depending on depth	of casing leak, eithe	r squeez	e or pull and rep	lace casing		
 Depending on depth of casing leak, either squeeze or pull and replace casing. Pressure test casing, resume active injection. 						
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hereby certify that the information at	pye is true and complete	e to the be	st of my knowledge	and belief.		
SIGNATURE ///	/4/1//n	TITLE	ъ			
SIGNATURE JULY		TITLE	President		DATE7-9-02_	
Type or print name Robert Mc	Alpine//			Telen	phone No.915-697-0967	
(This space for State use)	The second second		C ~	1 ciep	none 140.713-07/-070/	
-		(The sal dials	•		
APPPROVED BY	Т	TTLE	PAUL E KALE) BY	DATE JUL 1 6 700	
Conditions of approval, if any:		PE	TROLFILM	?	- O RIM	
			TROLEUM ENGIN	EER	\	