

CC D - Hobbs

Form 3160-5  
(August 1999)UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM 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. <b>NMLC 069052</b>
2. Name of Operator <b>SAGA PETROLEUM LLC</b>		6. If Indian, Allottee or Tribe Name
3a. Address <b>415 W WALL, SUITE 1900 MIDLAND, TX 79701</b>	3b. Phone No. (include area code) <b>(915)684-4293</b>	7. If Unit or CA Agreement, Name and/or No. <b>#8910084910 - W Dollarhide Qn Sd U</b>
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>330' FNL &amp; 1650' FEL Sec. 31 (B), T24S, R38E</b>		8. Well Name and No. <b>West Dollarhide Queen Unit #24</b>
		9. API Well No. <b>30-025-12276</b>
		10. Field and Pool, or Exploratory Area <b>Dollarhide Queen</b>
		11. County or Parish, State <b>Lea NM</b>

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input 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 type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input checked="" 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.)

Casing Integrity Test ran 3-31-2001 to extend TA status of well.

TD 3890', PBD 3836', Perfs 3571'-3742', Pkr @ 3481'

Pressure test csg to 480# for 30 mins - good test. Chart enclosed

TH

Ending 3/31/2002

2001 APR 11 P 2 23

14. I hereby certify that the foregoing is true and correct  
Name (Printed/Typed)

Bonnie Husband

Title

PRODUCTION ANALYST

Signature

*Bonnie Husband*

Date

04/10/2001

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

(OPIC SCD) JOE G. LARA

Title

CFC

Date

6/14/2001

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

CFC

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)