Form 3160-5 (August 1999)

CCK)-Hobbs

UNITED STATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

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

Lease Serial No. SUNDRY NOTICES AND REPORTS ON WELLS NMLC 067968

Do not use this form for proposals to drill or to re-enter an

abandoned well. Use Form 3160-3 (APD) for such proposals.						6. If Indian, Allottee or Tribe Name							
SUBMIT IN TRIPLICATE - Other instructions on reverse side 1. Type of Well Soil Well Gas Well Other 2. Name of Operator SAGA PETROLEUM LLC					7. If Unit or CA Agreement, Name and/or No. #8910084910 - W Dollarhide Qn Sd U 8. Well Name and No. West Dollarhide Queen Unit #102 9. API Well No. 30-025-30172 10. Field and Pool, or Exploratory Area								
									3a. Address 415 W WALL, SUITE 1900 MIDLAND, TX 79701 3b. Phone No. (include area code) (915)684-4293				
									4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1530' FNL & 2600' FEL Sec. 30 (G), T24S, R38E				
11. County or Parish, State Lea NM													
12. CHECK AI	PROPRIATE BOX(ES)	TO INDICATE	ENATURE	OF NOTICE, R	EPORT, (OR OTHER	DATA						
TYPE OF SUBMISSION	TYPE OF ACTION												
 ☒ Notice of Intent ☐ Subsequent Report ☐ Final Abandonment Notice 	 □ Acidize □ Alter Casing □ Casing Repair □ Change Plans □ Convert to Injection 	Deepen Fracture Tr New Const Plug and A Plug Back	ruction	Production (Start/ Reclamation Recomplete Temporarily Abar Water Disposal	ŕ	_	Shut-Off ntegrity						
Attach the Bond under which the following completion of the invo	3-31-2001 to extend TA	de the Bond No. on results in a multiple iled only after all re status of wel	file with BLM/ completion or r quirements, inc	BIA. Required subs ecompletion in a nev	equent report v interval, a I	s shall be filed form 3160-4 sh npleted, and th	within 30 da nall be filed or	ys 1ce					
Pressure test csg to 480# for 30 mins - good test. Chart enclosed							E A						
	7.	Anno	42	r Territoria	e Si	A STATE OF THE STA	- · ·						
		Ending	3/8/,	12002	antoway.		D 2: 23						
14. I hereby certify that the foregoin Name (Printed/Typed)	g is true and correct		Title										
Bonnie Husband				TION ANALYS	T								
			Date 04/10/200	1	· · · · · · · · · · · · · · · · · · ·								
	THIS SPACE	FOR FEDERA		E OFFICE USE									
proved by (03)6, 8600 10EG, 1884		Title	Title Date										
Conditions of approval, if any, are attentify that the applicant holds legal of which would entitle the applicant to contain the second	tached. Approval of this notice do r equitable title to those rights in t	oes not warrant or	Office	CFC.									