

Submit 3 Copies To Appropriate District Office

District I  
1625 N. French Dr., Hobbs, NM 87240

District II  
811 South First, Artesia, NM 87210

District III  
1000 Rio Brazos Rd., Aztec, NM 87410

District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

2040 South Pacheco  
Santa Fe, NM 87505

Form C-103

Revised March 25, 1999

WELL API NO.	30-025-30297
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. State Lease B9311	
7. Lease Name or Unit Agreement Name West Dollarhide Queen Unit  Agreement 8910084910	
8. Well No.	140
9. Pool name or Wildcat Dollarhide Queen	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3157 GR	

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 WIW ☐

2. Name of Operator  
SAGA PETROLEUM LLC

3. Address of Operator  
415 W Wall, Suite 1900  
Midland, TX 79701

4. Well Location  
  
Unit Letter K : 2150 feet from the South line and 1425 feet from the West line  
  
Section 32 Township 24S Range 38E NMPM County Lea

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOBS <input type="checkbox"/> OTHER: Sqz Lwr Perfs <input checked="" type="checkbox"/>

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work). SEE RULE 1103. For Multiple Completions: Attach diagram of proposed completion or recompletion.

7-27-2001 PU 5-1/2" 15.5# 32-A pkr, SN & RIH to 3704', set pkr, attempt to establish injection rate, had communication between upper & lwr perfs, move up hole to 3714' & set, attempt same procedure -still communication. Pulled pkr to 3704' & set. Pumped into lwr perfs @ 1 BPM @ 0 psi, still communicated, POOH w/pkr. RIH & set cmt retainer @ 3704', sqzd lwr perfs w/75 sx cmt, kept pressure on annulus while cmtg. Sqzd to 1700#. Pull out of CR & reverse circ 40 bbls. Reversed out very little cmt. SI, press up on annulus to 500#

Perfs 3714'-23', 3736'-39', 3752'-57', 3770'-76 sqzd off,

Pkr remains @ 3594' w/open perfs 3621'-36', 3662'-74', 3680'-84'. Well returned to active injection

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

SIGNATURE Bonnie Husband TITLE PRODUCTION ASSISTANT DATE 08/02/2001

Type or print name BONNIE HUSBAND

Telephone No. (915)684-4293

(This space for State use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE AUG 14 2001

Conditions of approval, if any: