

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 Revised March 25, 1999

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-015-32493
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator BTA Oil Producers		6. State Oil & Gas Lease No.
3. Address of Operator 104 S. Pecos, Midland, TX 79701		7. Lease Name or Unit Agreement Name:  Pardue "B", 8808 JV-P
4. Well Location  Unit Letter <u>K</u> : <u>2310</u> feet from the <u>south</u> line and <u>1650</u> feet from the <u>west</u> line Section <u>11</u> Township <u>23S</u> Range <u>28E</u> NMPM <u>Eddy</u> County		8. Well No. <u>3</u> <u>3</u>
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 2988' GL 3001' KB		9. Pool name or Wildcat East Loving - Brush Canyon

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data <b>NOTICE OF INTENTION TO:</b> 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"/>		<b>SUBSEQUENT REPORT OF:</b> 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 JOB <input type="checkbox"/> OTHER: Casing Record <input checked="" type="checkbox"/>
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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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

11/29/2002 8-5/8" 24# J55 STC set at 447' w/300 sx PBCA with 1/4 #/sx Flocele. Cmt circ. WOC 12 hours.

12/10/2002 5-1/2" 15.5&17# J55 LTC set at 5640' w/1210 sx Interfill C with 1/4 #/sx Flocele and Halliburton Super H with 0.5% Halad-344. Casing set on slips. Cmt circ.

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

SIGNATURE Pam Inskeep TITLE Regulatory Administrator DATE 02/12/2003

Type or print name Pam Inskeep Telephone No. (915) 682-3753  
 (This space for State use)

APPROVED BY Accepted for record TITLE Regulatory Administrator DATE MAR 04 2003  
 Conditions of approval, if any: