

xSubmit 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

Form C-103
May 27, 2004

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

WELL API NO. 30-015-34621
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Pardue -B-, 8808 JV-P
8. Well Number 6
9. OGRID Number 003002
10. Pool name or Wildcat Loving; Brushy Canyon, East 40350

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 ☐

2. Name of Operator
BTA Oil Producers

3. Address of Operator
104 S. Pecos, Midland, TX 79701

4. Well Location
Unit Letter K : 1650 feet from the south line and 1850 feet from the west line
Section 11 Township 23S Range 28E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
2984' GL

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. 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 recompletion.

5/8/2006 142 jts 5-1/2" 15.5&17# J55 LTC C @ 6351' w/1565 sx (1050 sx Interfill C +1/4#/sx Flocele & 515 sx Super H w/0.5% Halad-344, 0.4% CFR2, 5#/sx Gilsonite, 3#/sx Salt). Circ 200 sx to surface. Set slips & cut off.
Test csg to 1000 psi for 30 min - okay.

5/9/2006 Rig released 1 a.m.

5/18/2006 Test csg to 1000 psi for 30 min - okay.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Pam Inskeep TITLE Regulatory Administrator DATE 06/15/2006

Type or print name Pam Inskeep E-mail address: pinskeep@btaoil.com Telephone No. (432) 682-3753

For State Use Only

FOR RECORDS ONLY

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):