State of New Mexico · Submit 3 Copies To Appropriate District Form C-103 Office Energy, Minerals and Natural Resources Revised May 08, 2003 District 1 WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30.015.01643 District II OIL CONSERVATION DIVISION 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III STATE X FEE \square 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 1220 S. St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS. 7. Lease Name or Unit Agreement Name: (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PUBLISHACK TO A Empire Abo Unit "F" DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C: 101) FOR SUCH PROPOSALS.) 8. Well No. 1. Type of Well: Oil Well 🗶 Gas Well Other 2. Name of Operator 9. OGRID Number BP America Production Company 000778 3. Address of Operator 10. Pool name or Wildcat P.O. Box 1089 Eunice NM 4. Well Location 2310 N 2260 Unit Letter feet from the line and feet from the line Section **Township NMPM** 17S Range 28E County Eddy 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3661' 12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND **ABANDONMENT** PULL OR ALTER CASING CASING TEST AND MULTIPLE COMPLETION CEMENT JOB OTHER: OTHER: MIT X 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. TD: 5971' PBD: 5953' PERFS: 5706-5753' 10.14.03: Load and test casing to 600# psi. Held 30 mins. Casing test was not witnessed by a NMOCD representative. Chart attached. BP America Production Company has evaluated this wellbore and has determined that these is production potential in the Abo formation. Permission to retain TA status is therefore requested in order to complete our current workover program and develop another workover program which will require interest owner approval to TEMBEREN Abandonad Steam eporovad provide funding. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Staff Support SIGNATURE_

TITLE

Telephone No. 505.394.1649

PROVEDDOCE 2

APPROVED BY______Conditions of approval, if any:

(This space for State use)

Type or print name Kellie D. Murrish

