2Submit 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

SEP 2003 RECEIVED OCD - ARTESIA

Form C-103
Revised June 10, 2003

WELL API NO.
30-015-01650

5. Indicate Type of Lease
STATE X FEE

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name
EMPIRE ABO UNIT "G"

1. Type of Well:
Oil Well ☐ Gas Well ☐ Other

8. Well Number
23

2. Name of Operator
BP AMERICA PRODUCTION COMPANY

9. OGRID Number

3. Address of Operator
P.O. BOX 1089 EUNICE, NM 88231

10. Pool name or Wildcat
ABO

4. Well Location
Unit Letter _____ : 1650' feet from the S line and 1958.35 feet from the E line
Section 31 Township 17S Range 28E NMPM EDDY County

11. Elevation *(Show whether DR, RKB, RT, GR, etc.)*
3698' GR

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	X
PULL OR ALTER CASING	☐	MULTIPLE COMPLETION	☐	CASING TEST AND CEMENT JOB	☐		
OTHER:			☐	OTHER:			☐

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: 6094' PB: 6063' CSG: 5 ½" PERFS: 5613'-5787 TOC- CIRCULATE TO SURFACE

1. 9-16-03 TAG CIBP @ 5563' SPOT 8 SX CMT ON TOP OF CIBP CIRCULATE WELL W/ 9.5 KCL MUD
2. PRESSURE TEST TO 500# OK SPOT CMT FROM 3230' 25 SX CMT WOC TAG PLUG @ 2997'
3. 9-17-03 PUH TO 1290' SPOT 25 SX CMT POOH WOC TAG PLUG @ 1060'
4. PUH TO 370' CIRCULATE CMT TO SURF WOC 24 HRS CMT @ SURFACE
5. CUT OFF WELL HEAD & ANCHORS CPEED WELL W/ STEEL PLATE INSTALL DRY HOLE MARKER
6. RIG DOWN CLEAN LOCATION

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

SIGNATURE _____ TITLE Wells Team Lead DATE 8/27/2003

Type or print name Jim Pierce E-mail address: Telephone No.(505) 677-3642

(This space for State use)

APPPROVED BY _____ TITLE Field Rep II DATE _____

Conditions of approval, if any:

APPROVED DEC 3 2003