Submit-3 Copies To Appropriate District

State of New Mexico

Form C-103

Office	Energy, Minerals and Natur	ral Resources		Revised May 08, 2003
District I 1625 N. French Dr., Hobbs, NM 87240			WELL API NO.	
District II	OIL CONSERVATION	N DIVISION	30.015.	
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Fra		5. Indicate Type of	Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 8		STATE 🗷	FEE 🗌
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	,		6. State Oil & Gas 1 2029-63	Lease No.
SUNDRY NOTICE	ES AND REPORTS ON WEL	16		Init A anagement Names
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLIC	SALS TO DRILL OR TO DEEPEN (OR PLUG BACK TO A	Riverwolf Unit	Unit Agreement Name:
PROPOSALS.) 1. Type of Well:	R	ECEIVED	8. Well No.	
Oil Well X Gas Well	Other			
	- Other	EC 1 6 7803	9. OGRID Number	
2. Name of Operator		D ADTECLS		170
BP America Production Compa	any OC	D-ARTES!	0007	
3. Address of Operator	0004		10. Pool name or V	viidcat
P.O. Box 1089 Funice NM 8 4. Well Location	8231	<u></u>	Empire Abo	
4. Well Location			•	
Unit Letter C:	990 feet from the 1	N line and	1980 feet from	n the line
Section 2	Township 185	Range 27E	NMPM	County Eddy
350565050505056555050555555555555555555	11. Elevation (Show whether			
	(, , , ,		
12 Check A	ppropriate Box to Indicate	Nature of Notice	Report or Other	Data
NOTICE OF INTE	•• •	1	•	
_		1	SEQUENT REP	
PERFORM REMEDIAL WORK	PLUG AND ABANDON 🗌	REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILL	ING OPNS. 🔲	PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AND CEMENT JOB		, 15, 11, 15 (1, 11, 12, 11, 11, 11, 11, 11, 11, 11, 1
OTHER:		OTHER: Production	on Cycling	X
In response to Notice of V America Production Company flowed for production cycl to build up pressure and f	SEE RULE 1103. For Multiple PERFS: 5253-5443' Violation - Inactive Well v provides the following the ling purposes on an intermal flow enough to test again	dated September 13 cest information.	n wellbore diagram of 3, 2003, BP This well is	proposed completion
09.22.03: 15 MCF, 0 BO, 0 10.09.03: 121 MCF, 1 BO,				
I hereby certify that the information above				
CICKIATUDE //J/J/ X //.	- / / / / / / / / / / / / / / TIT	TE Staff	Simport	DATE 12.15.03

Thereby defining that the analysis of the data complete to the dest of my knowledge and defice.							
SIGNATURE //// // // // // // // // // // // //	TITLE Staff Support	DATE	12.15.03				
Type or print name Kellie D. Murrish		Telephone No.	505.394.1649				
(This space for State use)							
APPROVED BY Conditions of approval, if any:	TITLE	DATE					