Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103
Office District I	Energy, Minerals and Natural Resources	Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 88240	45670	WELL API NO.
Districg II 811 South First, Artesia, NM 88210	OIL CONSERVATION DIVISION (S)	30-045-28601
District III	1220 South Stancis Dr.	35. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505 2004	6 State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	S CALL OF	State Of the Gas Dease No.
87505 SUNDRY NOT	TICES AND REPORTS ON WELLS	Lease Name or Unit Agreement Name:
(DO NOT USE THIS FORM FOR PROP	OSALS TO DRILL OR TO DEEPEN OF PLUG BACK TO A 💢 🛇	Gallegos Canyon Unit
DIFFERENT RESERVOIR. USE "APPL PROPOSALS.)	ICATION FOR PERMIT" (FORM C-10 NFFOR SUCH	
1. Type of Well:	CE CE 15 MC MILE	
Oil Well Gas Well	X Other	
2. Name of Operator		8. Well No.
BP America Production Compan	y Attn: Cherry Hlava Room 19.178	13 SWD #1
3. Address of Operator		9. Pool name or Wildcat
P.O. Box 3092 Houston, TX	77253	Mesaverde
4. Well Location		
Unit Letter J	1467 feet from the South line and 2350	feet from the East line
Section 13	Township 29N Range 13W	NMPM San Juan County
	10. Elevation (Show whether DR, RKB, RT, GR, et	(c.)
	5416' <i>G</i> R	
	Appropriate Box to Indicate Nature of Notice,	•
PERFORM REMEDIAL WORK		SSEQUENT REPORT OF: RK □ □ ALTERING CASING □
FERFORM REMEDIAL WORK L	T PLOG AIND ABAINDOIN LT REWIEDIAL WOR	ALTERING CASING
TEMPORARILY ABANDON	☐ CHANGE PLANS ☐ COMMENCE DR	ILLING OPNS PLUG AND
PULL OR ALTER CASING	AND TIPLE CASING TEST A	ABANDONMENT
FULL OR ALTER GASING	→ MULTIPLE □ CASING TEST A COMPLETION CEMENT JOB	
OTTIER.	OTHER: Acid J	
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.		
of recompliance.		
5/20/04 RU acid pmp truck. Acidized well w/1500 gal xylene & 3,000 gal 15% HCL. Turn well over to production.		
3/20/04 NO acid pilip truck. Aci	dized well w/1300 gal xylene & 3,000 gal 13/6 ffcL.	i din wen over to production.
I haraby contify that the informati	an above is two and complete to the best of will be allowed	J 1 1' . C
r hereby certify that the informati	on above is true and complete to the best of my knowled	age and belief.
SIGNATURE Chrony	ava TITLE Regulatory Analysi	t DATE= <u>: 08/31/2004</u>
Type or print name Cherry I	ing the state of t	
(This space for State use)	A SAME WARREN TO THE PROPERTY OF THE PROPERTY	Telephone No. 281-366-4081
(This space for State use)	0 1 /	SEP -7 2004
APPPROVED BY Charle	TITLE DEPUTY OIL & GAS INS	DATE
Conditions of approval, if any:		