Submit I Copy To Appropriate District Office	State of New Energy, Minerals and N		Form C-103 Revised July 18, 2013	
<u>District 1</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	ict II – (575) 748-1283 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION		WELL API NO. 30-045-06935	
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178			5. Indicate Type o	
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505		STATE	
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Sunta 10, 100 07505		6. State Oil & Gas Lease No. Federal CA 92000844	
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			 Lease Name or Unit Agreement Name Gallegos Canyon Unit 	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			8. Well Number	
2. Name of Operator			9. OGRID Number	
BP America Production Company			000778	
3. Address of Operator			10. Pool name or Wildcat	
501 Westlake Park Blvd.			Basin Dakota	
Houston, TX 77079 4. Well Location				
Section 05 Township 27N Range 12W NMPM County San Juan 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
5603'				
PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: 13. Describe proposed or comp	y has landed tubing in the subj	REMEDIAL WOR COMMENCE DR CASING/CEMEN OTHER: L all pertinent details, an AAC. For Multiple Co ect well. Operations v	ILLING OPNS. T JOB and Tubing and Tubing d give pertinent date: mpletions: Attach w vere as follows: OP'S, RD SERVIC	ALTERING CASING P AND A s, including estimated date ellbore diagram of E UNIT, MOVE OFF
BLM notified for CA Agreement 92	2000844	•	C	IL CONS. DIV DIST. 3
Spud Date: 10/10/19	65 Rig Releas	se Date:		JUN 2 3 2014
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE JOYA COM TITLE Regulatory Analyst DATE 06/18/2014				
Type or print name <u>Toya Col</u> For State Use Only	vin E-mail address: _	<u></u>		281-366-7148
APPROVED BY: BAR	TITLE		DA	ге <u>7/7/14</u>
Conditions of Approval (if any):				

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