(DO NOT USE THIS FORM FOR PROPO	State of New Mexico Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505 TICES AND REPORTS ON WELLS POSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A LICATION FOR PERMIT" (FORM C-101) FOR SUCH Gas Well Other OLICATION S. DIV DIST. 3		Form C-103 Revised July 18, 2013 WELL API NO. 30-045-24974 5. Indicate Type of Lease STATE FEE 6 6. State Oil & Gas Lease No. 7. Lease Name or Unit Agreement Name Schneider Gas Com Fruitland B 8. Well Number IS
2. Name of Operator			9. OGRID Number
BP America Production Company 3. Address of Operator	AUG 1 0 2015		000778 10. Pool name or Wildcat
5. Address of Operator 501 Westlake Park Blvd.			Basin Fruitland Coal
Houston, TX 77079			Dashi i futtana Coar
4. Well Location			
Unit Letter M_:	950 feet from the South	line and 900	feet from the West line
Section 28	Township 32N Rang		MPM County San Juan
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
6063'			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
12. Check Appropriate Box to maleate Fatale of Honee, Report of Other Bata			
NOTICE OF INTENTION TO: SUB PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM		LLING OPNS. P AND A	
OTHER:		OTHER: Cano	cel PC Formation
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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of			
proposed completion or recompletion.			
BP America Production Company would like to cancel the Pictured Cliffs formation in the subject well. The well is			
currently only producing from the Basin Fruitland Coal formation.			
Card Data 04/15/1081 Dia Datas Data			
Spud Date:04/15/1981Rig Release Date:			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
Thereby certify that the information above is the and complete to the best of my knowledge and bener.			
SIGNATURE TITLE Regulatory Analyst DATE 08/05/2015			
Type or print name Toya Colvin E-mail address: Toya.Colvin@bp.com PHONE: 281-366-7148			
For State Use Only			
For State Use Only			
APPROVED BY Juny Dunsch TITLE Line Monager II DATE AUG 2 6 2015			
Conditions of Approval (if any)			
0			