| Submit 1 Copy To Appropriate District Office | State of New Mexico | | | Form C-103 |
|--|--|--|---|-----------------------|
| District I – (575) 393-6161 | Energy, Minerals and Natural Resources | | 127011 170110 | Revised July 18, 2013 |
| 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283 | OIL CONSERVATION DIVISION | | WELL API NO. 30-045-29030, 30-045-29031 | |
| 811 S. First St., Artesia, NM 88210 | | | 5. Indicate Type of | |
| District III - (505) 334-6178 | 1220 South St. Francis Dr. | | STATE | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 | Santa Fe, NM 87505 | | 6. State Oil & Gas | |
| 1220 S. St. Francis Dr., Santa Fe, NM | | | State of New Mexico #2 | 2- B13303 |
| 87505 SUNDRY NOTICES AND REPORTS ON WELLS | | | State of New Mexico #3 | Jnit Agreement Name |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | | | 7. Bease Maine of Other Agreement Maine | |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) | | State of New Mexico #2, State of New Mexico #3 | | |
| 1. Type of Well: Oil Well Gas Well Other | | 8. Well Number | | |
| | | | 9. OGRID Number | |
| Name of Operator BP America Production Company | | | 9. OGRID Number 000778 | |
| 3. Address of Operator | | | 10. Pool name or Wildcat | |
| 501 Westlake Park Blvd., Three Eldridge Place 12.181A | | | W. Kutz Pictured Cliffs State of New Mexico#2 | |
| Houston, TX 77079 | | | Basin Fruitland Coal State of New Mexico #3 | |
| 4. Well Location | | | | |
| Unit Letter A (#2) B (#3): 1100'(#2) 790' (#3) feet from the North line and 790' (#2), 1780' (#3) feet from the East line | | | | |
| Section 16 Township 29N Range 12W NMPM County San Juan | | | | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | | |
| 5785'GL-State of New Mexico #2, 5783'GL-State of New Mexico #3 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 | | | | |
| PULL OR ALTER CASING | | | | |
| DOWNHOLE COMMINGLE | | | | |
| CLOSED-LOOP SYSTEM ☐ OTHER: 🖾 | OT | HER: Sur | face Commingle Firs | st Delivery 🕅 |
| 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. | | | | |
| | | | | |
| Subject wells started surface com- | ningling 6/23/2015 | | | |
| Subject wells started surface commingling 6/23/2015 State Of New Mexico #2 Allocation Meter No. 52960002, State Of New Mexico #3 Allocation Meter No. 52970003 | | | | |
| Enterprise Sales Meter No. 97907 | | | | |
| • | | | OIL CC | INS. DIV DIST. 3 |
| PLC 423 | | | | UO 0 1 2015 |
| | | | A | UG 3 1 2015 |
| | | | ···· | |
| Spud Date: 02/01/1994 #2, 04/ | 19/1994 #3 Rig Release Date: | | | |
| | | | | |
| | | | | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. | | | | |
| SIGNATURE MURA (ICH) | | | | |
| SIGNATURE JUST CO | TITLE Regulate | ory Analyst | DATE <u>08/28/201</u> | <u>5</u> |
| Type or print name Toya Colvin E-mail address: Toya.Colvin@bp.com PHONE: 281-366-7148 | | | | |
| For State Use Only | | <u></u> | 111011D <u>20</u> | |
| APPROVED BY: ACCEPTED FOR RECORD TITLE | | | DATE | |
| Conditions of Approval (if any): | | | | |
| | | | | |
| | | | | |