

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-031-05220
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

**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 PROPOSALS.)

7. Lease Name or Unit Agreement Name Hospah Sand Unit
8. Well No. 54
9. Pool name or Wildcat Hospah Upper Sand

1. Type of Well:  
OIL WELL ☐ GAS WELL ☐ OTHER Injector

2. Name of Operator  
BC & D Operating, Inc.

3. Address of Operator  
P.O. Box 837 Hobbs, NM 88241

4. Well Location  
Unit Letter L : 577 Feet From The WEST Line and 1980 Feet From The SOUTH Line  
Section 31 Township 18N Range 8W NMPM McKINLEY County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ☐

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.

The subject well has never been converted to a water injector. BC & D requests that the injection permit be canceled. It is proposed to pump test the well for commercial production. If commercial production is proven, place on active status. If commercial production is not achieved then the well should be plugged.

RECEIVED  
APR 12 1996  
OIL CON. DIV.  
DIST. 3

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Donnie Hill TITLE President DATE 4/4/96  
TYPE OR PRINT NAME Donnie Hill TELEPHONE NO 505/397-3972

(This space for State Use)

APPROVED BY Johnny Robinson TITLE STAFF OIL & GAS INSPECTOR, DIST. 3 DATE APR 12 1996  
CONDITIONS OF APPROVAL, IF ANY: