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 \$8240

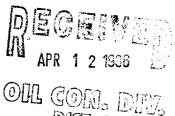
CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION P.O. Box 2088

VELL API NO.	
30-031-05220	
5. Indicate Type of Lease	
STATE	FEE X

DISTRICT II Santa Fe. New Mexico 87504-2088	30 031 03220	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088	5. Indicate Type of Lease STATE FEE X	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	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	
1. Type of Well: OR. GAS		
WELL OTHER Injector	Hospah Sand Unit	
2. Name of Operator	8. Well No.	
BC & D Operating, Inc.	54	
3. Address of Operator	9. Pool name or Wildcat	
P.O. Box 837 Hobbs, NM 88241	Hospah Upper Sand	
Unit Letter L: 577 Feet From The WEST Line and 1980 Section 31 Township 18N Range 8W 10. Elevation (Show whether DF, RKB, RT, GR, etc.)	Feet From The SOUTH Line NMPM McKINLEY County	
11. Check Appropriate Box to Indicate Nature of Notice, R	eport, or Other Data	
NOTICE OF INTENTION TO: SUB	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK X PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING CASING TEST AND CE	EMENT JOB .	
ØTHER: OTHER:		
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, incluwork) SEE RULE 1103.	ding estimated date of starting any proposed	

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.



		DIST. 3
I hereby certify that the Affiormation above is true and complete to the best of my known	edge and belief. TITLE President	DATE 4/4/96
TYPEOR PRINT NAME Donnie Hill		TELEPHONE NO505/397-3972
(This space for State Use)	moles v CD & FAS INSPECTIVE	DIST #3 APR 1 2 1996