

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. 30-031-05576
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.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER WIW
2. Name of Operator BC&D OPERATING, INC.
3. Address of Operator PO BOX 837 HOBBS NM 88241
4. Well Location Unit Letter <u>H</u> : <u>2070</u> Feet From The <u>NORTH</u> Line and <u>1590</u> Feet From The <u>EAST</u> Line Section <u>1</u> Township <u>17N</u> Range <u>9W</u> NMPM <u>MCKINLEY</u> County

7. Lease Name or Unit Agreement Name HOSPAH SAND UNIT
8. Well No. 67
9. Pool name or Wildcat HOSPAH UPPER SAND

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 6916 GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

BC&D REQUESTS THE AUTHORITY TO INJECT BE CANCELED. THE WELL WILL BE PA'D.

GEOLOGIC MARKERS:
POINT LOOKOUT @ 320' 7" 20# @ 83' CMT CIRCULATED
MANCOS @ 540' 4 1/2" 9.5# @ 1634' WITH 55 SX CMT
GALLUP @ 1550'

RECEIVED
APR 16 1998

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 <u>Donnie Hill</u>	TITLE <u>PRESIDENT</u>	DATE <u>4/8/98</u>
TYPE OR PRINT NAME <u>DONNIE HILL</u>	TELEPHONE NO. <u>505/397-3972</u>	

(This space for State Use)

APPROVED BY <u>Johnny Robinson</u>	TITLE <u>DEPUTY OIL & GAS INSPECTOR, DIST. #3</u>	DATE <u>APR 16 1998</u>
CONDITIONS OF APPROVAL, IF ANY:		