

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.

30-031-20148

5. Indicate Type of Lease

STATE ☐

FEE ☒

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 ☐

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 C : 1220 Feet From The North Line and 2600 Feet From The West Line

Section 7

Township 17N

Range 8W

NMPM

McKinley

County

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

6953'

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 is shut-in due to American Exploration pulling the tbg out of the well. The well had failed a previous MIT prior to BC & D purchasing the property. American repaired the well w/ 220 SX CMT, but did not place the well back on injection. BC & D proposes to install a pkr and tbg, conduct an MIT and place on injection if successful. If the MIT is not successful, establish a method to repair. The well is needed for pressure maintenance to effectively drain the reservoir.

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

DEPUTY OIL & GAS INSPECTOR, DIST. #3

DATE

APR 12 1996

CONDITIONS OF APPROVAL, IF ANY: