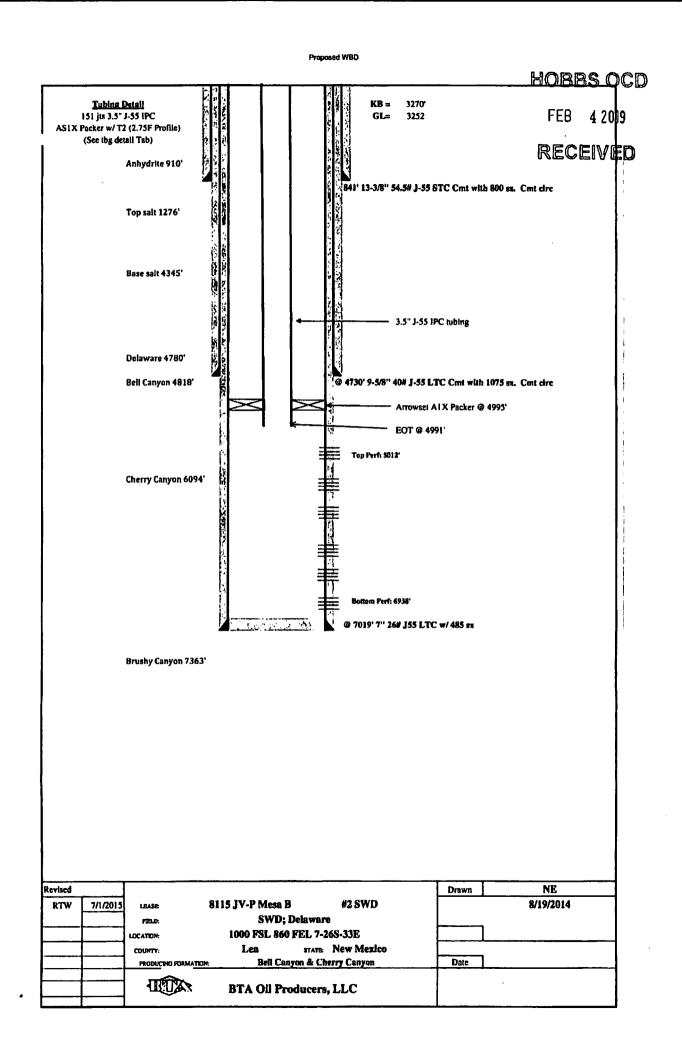
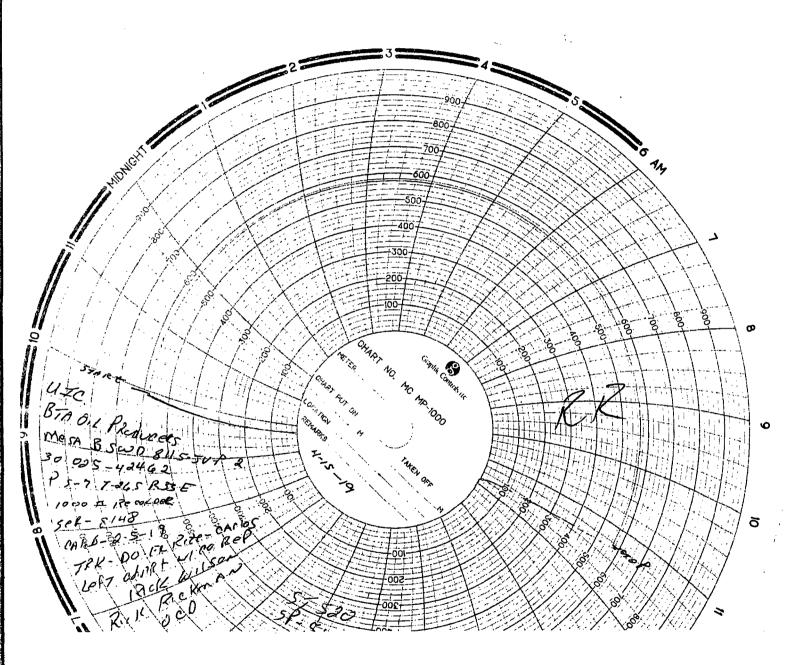
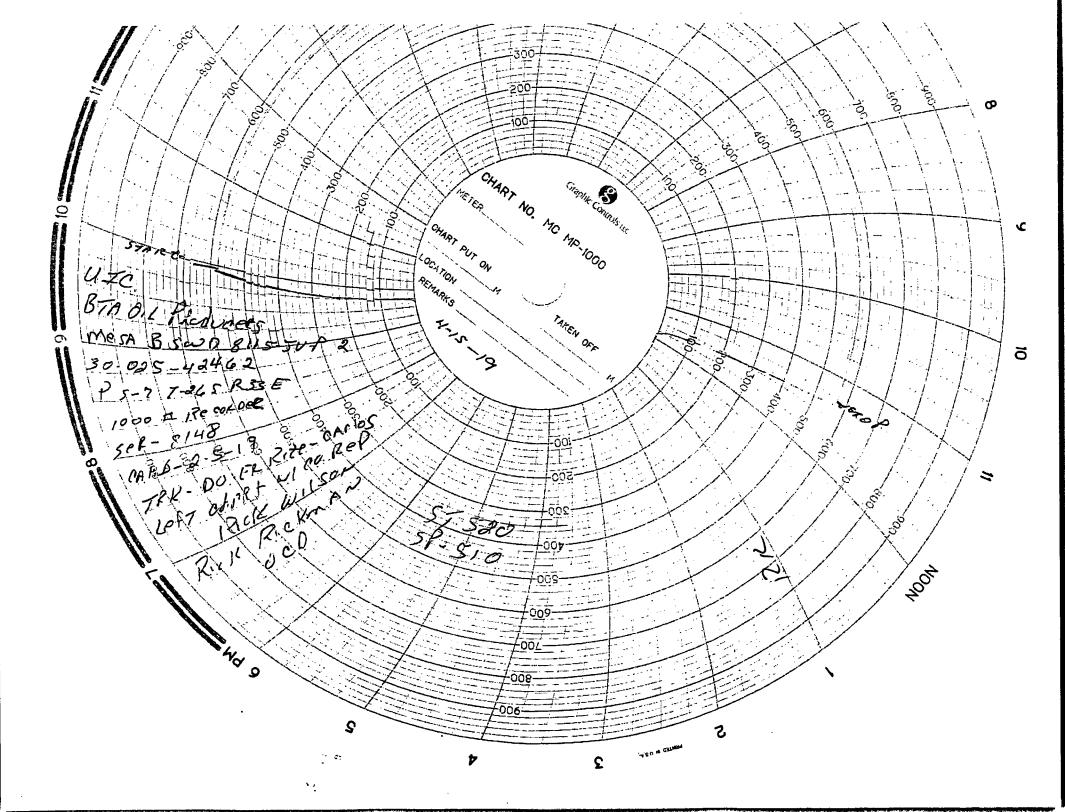
| Submit 1 Copy To Appropriate District State of New Mexico | Form C-103 | | | | |
|--|---|--|--|--|--|
| Office District I - (575) 393-6161 Energy, Minerals and Natural Resou | rces Revised July 18, 2013 WELL API NO. | | | | |
| 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283 | 20,026,42462 | | | | |
| District III - (5/5) 748-1285 OIL CONSERVATION DIVISIO 811 S. First St., Artesia, NM 88210 01L CONSERVATION DIVISIO District III - (505) 334-6178 1220 South St. Francis Dr. | 5. Indicate Type of Lease | | | | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 Sonto Eo. NIM 97505 | | | | | |
| District IV – (505) 476-3460 Salita FC, 1111 67505 1220 S. St. Francis Dr., Santa FC, NM | 6. State Oil & Gas Lease No. | | | | |
| 87505 | 7. Losso Nomo ex Unit Assessment Nomo | | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH DEFENSION OF THE DEPENDENCE | 0 A 7. Lease Name or Unit Agreement Name MESA B SWD 8115 JV-P | | | | |
| PROPOSALS.) 1. Type of Well: Oil Well Gas Well X Other | 8. Well Number 2 | | | | |
| 2. Name of Operator BTA OIL PRODUCERS, LLC | 9. OGRID Number 260297 | | | | |
| 3. Address of Operator | 10. Pool name or Wildcat | | | | |
| 104 S PECOS; MIDLAND, TX. 79701 | SWD, DELAWARE 96100 | | | | |
| 4. Well Location | | | | | |
| Unit Letter P :_ 1000 feet from the SOUTH the and _860 | feet from the _EASTline | | | | |
| Section 7 Township 26S Range | 33E NMPM County LEA | | | | |
| 11. Elevation (Show whether DR, RKB, RT, 3252' GR | GR, etc.) | | | | |
| | <u>ال الم الم الم الم الم الم الم الم الم ا</u> | | | | |
| 12. Check Appropriate Box to Indicate Nature of | Notice, Report or Other Data | | | | |
| | · • | | | | |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK X PLUG AND ABANDON REMEDIAL WORK A LITERING CASING REMEDIAL WORK | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| OTHER: OTHER: OTHER: OTHER: OTHER: | | | | | |
| of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Mu | | | | | |
| proposed completion or recompletion. | | | | | |
| BTA OIL PRODUCERS, LLC WORKOVER PROCEDURE: | | | | | |
| Set Blanking plug in packer @ 4,995'. POH w/tbg and replace bac | i joint. (hole in tab.) RIH and tag nacker | | | | |
| Circulate packer fluid. Latch up to packer. ND BOP, JU WH. Pres | | | | | |
| plug in packer. | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| Spud Date: Rig Release Date: | | | | | |
| | | | | | |
| | | | | | |
| I hereby certify that the information above is true and complete to the best of my k | mowledge and belief. | | | | |
| | | | | | |
| SIGNATURE COLTY FOUND TITLE REGULATOR | RY ANALYSTDATE4/24/2019 | | | | |
| | | | | | |
| Type or print name _KATY REDDELL E-mail address: kreddell@btaoil.c | com PHONE: _432-682-3753 | | | | |
| For State Use Only | DEC | | | | |
| APPROVED BY: Rick RickMAN TITLE COMPLIANCE OFFICERDATE 41-26-19 | | | | | |
| Conditions of Approval (if any): | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |







District 1 1625 N. French Dr., Hobbs, NM 88240 Phone: (375) 393-6161 Fax: (575) 393-0720

State of New Mexico **Energy, Minerals and Natural Resources Department Oil Conservation Division Hobbs District Office**

BRADENHEAD TEST REPORT 30-025-42462 **Operator Name BTA OIL PRODUCERS, LLC** Well No. Property Name MESA B SWD 8115 JV-P 002 ^{7.} Surface Location N/S Line S E/W Line E UL - Lot Feet from Section Feet From Township 26-S Range 33-E County 860 07 P 1000 LEA Well Status DATE TA'D Well SHUT-IN INJECTOR PRODUCER Here 4-15-19 SWD (NO YES YES NO INJ OIL GAS **OBSERVED DATA** (B)Interm(1) (A)Surf-Interm (C)Interm(2) (D)Prod Csng (E)Tubing Pressure \propto $\overline{\mathcal{C}}$ $\mathbf{\nabla}$

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|--------|--|--|--|--|
| YLA | YIN | Y/N | Y/W | CO2 |
| YÁN | YIU | Y/ N | Y/W | - WTR |
| Y/4 | YIOF | Y/N | YIS | GA8 |
| - COIN | N N | W N | (L'N | If applicable type |
| YIC | Y IOV | Y/N. | Y K.N. | fluid injected for |
| Y/W | W Y | Y/N | N/N | Waterflood |
| | Y LN Y LN Y LN Y JN Y JN Y JN | Y LAP Y 100 Y LAP Y 100 Y LAP Y 100 Y 14P Y 100 Y 14P Y 100 Y 100 Y 100 | Y (AP) Y (N) Y / N Y (AP) Y / N Y / N Y (AP) Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / QU Y / ON Y / N Y / QU Y / ON Y / N | Y CAP Y / N Y / N Y / N Y LN Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / N Y / O Y / O Y / N Y / N |

Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

| Signature: | | OIL CONSERVATION DIVISION | |
|-------------------------|---------------------------------------|-------------------------------|--|
| Printed name Title: | | Entered into RBDMS Re-test | |
| | | | |
| Date: 3120119 41-15 -19 | Phone: | | |
| | Witness-HERREPORTNER-OGD 675-399-3221 | | |
| Ride W! (SON 452- | Rick Rickman | | |