

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I  
P.O. Box 1980, Hobbs NM 88241-1980

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

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

2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO. <b>30-015-22606</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>B-3823-1</b>
7. Lease Name or Unit Agreement Name <b>Empire Abo Unit "I"</b>
8. Well No. <b>283</b>
9. Pool name or Wildcat <b>Empire Abo</b>

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator <b>BP America Production Company</b>	
3. Address of Operator <b>P.O. Box 1089 Eunice, NM 88231</b>	
4. Well Location Unit Letter <b>K1</b> : <b>175</b> Feet From The <b>N</b> Line and <b>300</b> Feet From The <b>E</b> Line Section <b>5</b> Township <b>18S</b> Range <b>28E</b> NMPM <b>Eddy</b> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <b>3661' GR</b>	

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: **MIT** ☒

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.

01.30.03: Load well and press test to 560# and held 30 mins.  
NMOCD notified but did not witness test. Chart attached.  
Request TA status to remain for future use and uphole potential.

Temporary Abandoned Status approved  
1-30-08

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

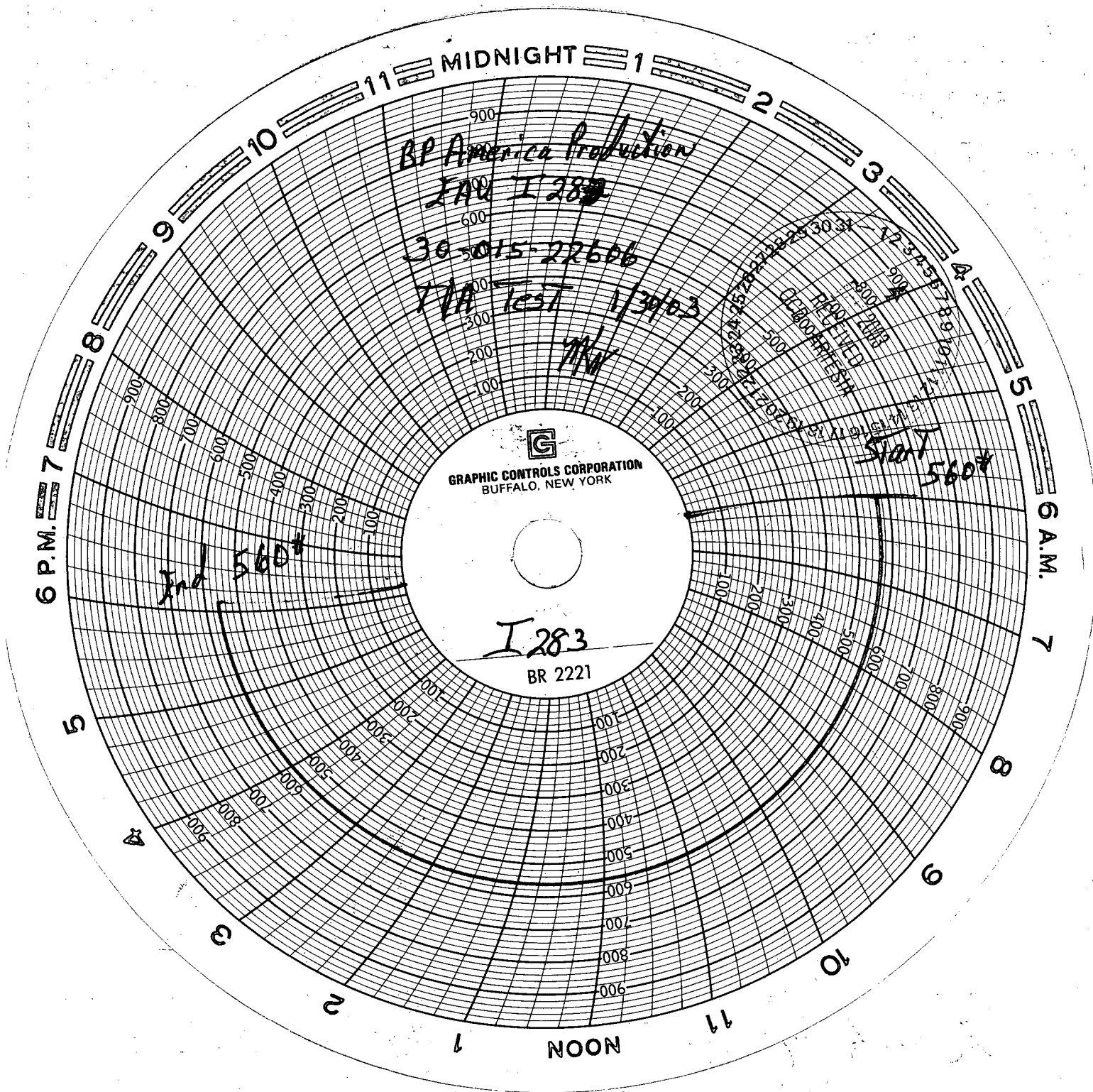
SIGNATURE Kellie D. Murrish TITLE Sr. Administrative Assistant DATE 02.04.03

TYPE OR PRINT NAME Kellie D. Murrish TELEPHONE NO. 505.394.1649

(This space for State Use)

APPROVED BY [Signature] TITLE Field Rep ID DATE FEB 18 2003

CONDITIONS OF APPROVAL, IF ANY:



8008 81 837