Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Energy, Minerals and Natural Resources Revised May 08, 2003 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30.015.22013 District II OIL CONSERVATION DIVISION 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III STATE IX FEE \square 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 1220 S. St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A EMPIRE ABO UNIT 'L' DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 8. Well No. 1. Type of Well: Oil Well x Gas Well Other 153 RECEIVEL 2. Name of Operator 9. OGRID Number BP America Production Company 000778 3. Address of Operator 10. Pool name or Wildcat P.O. Box 1089 Eunice NM 88231 EMPIRE ABO 4. Well Location 90 1456 Unit Letter ____ feet from the feet from the___ line and line Range Section Township -37E **NMPM** County **18**S **KDDY** 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON **REMEDIAL WORK** ALTERING CASING **CHANGE PLANS** COMMENCE DRILLING OPNS. **TEMPORARILY ABANDON PLUG AND ABANDONMENT PULL OR ALTER CASING MULTIPLE** CASING TEST AND **CEMENT JOB** COMPLETION OTHER: \mathbf{x} OTHER: MIT TO RETAIN TA STATUS 13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. TD: 6303' PBD: 6279' PERFS: 6028-6112' 04.06.05: LOAD AND PRESS TEST WELL TO 600#. HELD 30 MINS. HELD OK. MIT CHART ATTACHED. REQUEST TA STATUS RENEWAL TO BRING WELL INTO COMPLIANCE WITH INACTIVE WELL STATUS RULE.

1/57 TA. 1995 DR:112D	IN1977		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE LUCIE Y FULL STITLE	Scheduler	DATE _	04.21.05
Type or print name Kellie D. Murrial		Telephone No.	505.394.1649
(This space for State use)	A AAA		

APPROVED BY Conditions of approval, if any:

