Submit 3 Copies To Appropriate District	State of N					Form C-	
Office District I	Energy, Minerals and	l Natural	Resources			May 27, 2	2004
1625 N. French Dr., Hobbs, NM 87240					WELL API NO.		
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION			5 Indi	30-015-01646		
District III	1220 South St. Francis Dr.				5. Indicate Type of Lease		
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505				STATE 🔀	FEE	
1220 S. St. Francis Dr., Santa Fe, NM 87505				6. Stat	e Oil & Gas Leas 966	ė No.	
	ES AND REPORTS O			7. Lea	se Name or Unit	Agreement Name	»:
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)				EMPIR	E ABO UNIT		
1. Type of Well: Oil Well 🕱 Gas Well 🗌	Other RECEIVED			8. Wel	l Number H-22		
2. Name of Operator		MAY	0 1 2006	9. OGF	Number		
BP AMERICA PRODUCTION COM	PANY	-01011	VOTEOW.		000778		
3. Address of Operator		المائحاني	न्याक ॥ ह्या स्मृतकार-४	l l	ool name or Wildo	at	
P. O. BOX 3092, ROOM 6.115	5, HOUSTON, TEXAS 77	253		EMPIR	E ABO		
4. Well Location						•	İ
Unit Letter N :	660 feet from the	SOUTH	line and	i 2082	feet from the	WEST	line
Section 31			nge <b>28</b> I		M Co	ounty EDDY	
	11. Elevation (Show w	hether DR	, <i>RKB</i> , <i>RT</i> , (	GR, etc.)			
Pit or Below-grade Tank Application							
Pit type Depth to Groundwater	Distance from nea	rest fresh w	iter well	Distance from	n nearest surface wa	iter	
Pit Liner Thickness: mil	Below-Grade Tank:	Volume	bbls; Con	struction Materi	al	<u> </u>	
NOTICE OF INTI				SUBSEQU	ENT REPOR		G 🗀
TEMPORARILY ABANDON	CHANGE PLANS		OMMENCE D	RILLING OP	NS. 🔲 PI	LUG AND BANDONMENT	
PULL OR ALTER CASING	MULTIPLE COMPLETION		ASING TEST EMENT JOB	AND		SANDONNENT	
OTHER:			THER: RETU	IRN TO PRODU	CTION		X
<ol> <li>Describe proposed or complete of starting any proposed work). or recompletion.</li> </ol>							n
THIS WELL WAS RETURNED TO WATER=4 HBLS.	PRODUCTION ON 4/12/				- OII=10 BBIS	S., GAS=1 MCF,	£
				MOCD		L	
			st of my know	i.			
		=	BOX FORTY				
			, <b>*</b>				
I hereby certify that the information a	have is true and complete	to the h	et of my know	wledge and be	lief I further service	fu that any nit or ha	low-
grade tank has been/will be constructed or	closed according to NMOCD	guidelines [	, a general p	permit or an	(attached) alternativ	ve OCD-approved p	lan 🔃
SIGNATURE Suc Sull	us			RY STAFF AS	SISTANT DA	TE 4/26/0	6
Type or print name SUE SELLERS			l address:		sellers@bp.com		
For State Use Only							
APPROVED BYConditions of Approval, if any:		TITL	Ε		DAT	Е	
						1	