Submit 3 Copies To Appropriate District Office

State of New Mexico W. Minerals and Natural Resources

Form C-103

APPROVED OCT 2 8 2003

District I	Elicigy, Millerais	mu matu	iai Kesouices			Revised Ma	ay 08, 2003	
1625 N. French Dr., Hobbs, NM 87240				WELL	API NO.			
District II 1301 W. Grand Ave., Artesia, NM 88210	esia, NM 88210 OIL CONSERVATION DIVISION			5 India	30.015.22227 5. Indicate Type of Lease			
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.			l l	STATE X FEE			
District IV					6. State Oil & Gas Lease No.			
1220 S. St. Francis Dr., Santa Fe, NM 87505				o. State	OII & Gas L	case IVO.		
SUNDRY NOTICE		7. Lease Name or Unit Agreement Name:			Name:			
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)		OD14 O 40	ALEADTONIOLI	IMPLIE	Abo Unit	n.E.u		
1. Type of Well: Oil Well 🕱 Gas Well 🗌	Other	ORM C-10	7	8. Well	No. 341			
2. Name of Operator		1677	2000	9. OGR	9. OGRID Number			
BP America Production Company			<u> </u>					
3. Address of Operator P.O. Box 1089 Ennice NM 88231			720	~~ i	10. Pool name or Wildcat Empire Abo			
4. Well Location	823I	127475	A C	// EMD1re	ADO			
Unit Letter	1326 feet from th	e	NOLGRI line and	2593	feet from	the W	line	
Section 34	Township	17S	Range 28E	NMPM	ſ	County	Eddy	
	11. Elevation (Show				88888888			
	, , , , , , , , , , , , , , , , , , ,	3	673'	<u> </u>				
	ppropriate Box to	Indicate	Nature of Noti	ice, Report,	, or Other I	Data		
NOTICE OF INTE			1	UBSEQUE	ENT REPO		_	
PERFORM REMEDIAL WORK	PLUG AND ABANDO	ON 🗀	REMEDIAL WOR	RK		ALTERING C	ASING _	
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DR	ILLING OPN	s. 🗀	PLUG AND ABANDONM	ENT _	
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST A CEMENT JOB	ND				
OTHER:			OTHER: MIT				x	
13. Describe proposed or complete of starting any proposed work). or recompletion.								
TD: 6363' PBD: 6075' C	IBP: 6175' PERF	S: 6132	-6142'					
10.14.03: Load and test of	asing to 525# psi	. Held	30 mins. Casin	no test was	not witnes	ssed		
	esentative. Char			- 3				
		_			•	-		
	uction Company has roduction potentia							
_	erefore requested							
and develop and	ther workover pro							
provide funding	•				Tempona	ry Abandoned Status	e anneana	
					until /	0-14-0	S STANDARD	
							<u></u>	
I hereby certify that the information above	is true and complete to t	the hest of	f my knowledge and b	belief	.			
A . A (171	0031 01	, Knowledge and t	ooner.				
SIGNATURE / /// /	1 funst	ТІТ	LE Sta	aff Support		DATE10.	.24.03	
Type or print name Kellie D. Mur	rish			A A	Telephor	ne No. 505.3	394.1649	
(This space for State use)			TLE Sulo	1 Des	ID			
APPROVED BY Conditions of approval, if any:	/0\	TI	TLE	- P	DA	ATE		

