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Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103	
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		Revised March 25, 1999 WELL API NO.	
District II 811 South First, Artesia, NM 88210	OIL CONSERVATION DIVISION		30-045-27842	
District III	1220 South St. Francis Dr.		5. Indicate Type of Lease STATE FEE 🗓	
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u>	Santa Fe, NM 87505		6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505				
	TICES AND REPORTS ON WEI		7. Lease Name or	Unit Agreement Name:
(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			Hutch	in Gas Unit B
PROPOSALS.) 1. Type of Well:		21415 1EVI		
Oil Well Gas Well	X Other	2/3/4/2/0//		
2. Name of Operator BP America Production Company	Attn: Mary Corley	· Ang	8. Well No.	1
3. Address of Operator	Attil. Mary Corley	JAN 2000	9. Pool name or V	Vildcat
P.O. Box 3092 Houston, TX 77253		<u> </u>		Fruitland Coal
4. Well Location		ON 600. 3	7	
Unit Letter G 1400 feet from the North line and 1720 feet from the East line				
Section 07	Township 31N Range	10W NN	MPM San Juan	County
Section 07	10. Elevation (Show whether			County
5877'				
	Appropriate Box to Indicate NTENTION TO:	· · ·	-	
PERFORM REMEDIAL WORK		REMEDIAL WOR	SEQUENT REI ĸ □	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI	LLING OPNS.	PLUG AND
PULL OR ALTER CASING] MULTIPLE	CASING TEST AN	ND 🗆	ABANDONMENT
	COMPLETION	CEMENT JOB		
OTHER:		OTHER: Retur	rned to Production	X
12. Describe proposed or comple	ted operations. (Clearly state all	pertinent details, and g	ive pertinent dates,	including estimated date
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.				
The Hutchins Gas Unit B #1 was returned to production on December 9, 2002, producing approximately 35 MCFD.				
the reasoning approximately to more.				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE MUSA Articles TITLE Sr. Regulatory Analyst DATE 01/06/2003				
Type or print name Mary Corle				1-366-4491
(This space for State use)		DEPHTY		
APPPROVED BY Charle	TITL	DEPUTY OR & EAS INS	VICTOR, MIST, AR	JAN 13 2003
Conditions of approval, if any:	IIIL	<u> </u>	6999	DATE

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