Submit 3 Copies To Appropriate District	State of New Mexico		Form C-103
Office District I	Energy, Minerals and Natural Resources		May 27, 2004
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
District II	OIL CONSERVATION DIVISION		30045 32 427
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE
District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	5		NMSF078385
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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			Florance P
1. Type of Well: Oil Well	Gas Well 🔯 Other		8. Well Number 35
2. Name of Operator			9. OGRID Number
BP America		J. Golds Manibol	
3. Address of Operator		10. Pool name or Wildcat	
200 Energy Court Farmington NM 87401		FT	
4. Well Location			
Unit Letter I: 1745 feet from the F54 line and 785 feet from the FEL line			
Section 35 Township 30 Range 8 NMPM County S.J.			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
Pit or Below-grade Tank Application 🛛 or Closure 🗌			
Pit typeDepth to Groundwater 7/00 Distance from nearest fresh water well 2/000 Distance from nearest surface water 7/000			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK			· · · · · · · · · · · · · · · · · · ·
TEMPORARILY ABANDON	<u> </u>	COMMENCE DRIL	
PULL OR ALTER CASING		CASING/CEMENT	
			_
OTHER: : Below Grade Tank (With Leak Detection)			
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion			
or recompletion.			
or recompletion.			
Construct a below grade tank instal	llation per BP America - San Juan Ba	asin Below Grade Ta	ank Installation Plan issue date of 4/15/2004.
At time of closure, below grade tan	nk(s) will be closed according to close	ure plan on file.	
			A.T. 201 300 D
			10 19 70 m
			NOV A
			2000 I
			75 °
			Par Sec. Sill
I hereby certify that the information	n above is true and complete to the bear closed according to NMOCD guidelines	est of my knowledge	and belief. I further certify that any pit or below- or an (attached) alternative OCD-approved plan .
i de la	A 1		or an (attached) alternative OCD-approved plan [].
SIGNATURE Wennes (holyson TITLE	MANNER	
Type or print name Dennis	Anderson	idress: andersd	he bp.com, 505
For State Use Only		IDEASS OFFICE SOL	Telephone No. 301 Cut Cut
. or other one only	E-maii ac		326-94X
1 /			326-770
APPROVED BY:		PUT OR a sas M	SPECTOR COST. OF NOV 21 2005
APPROVED BY: Conditions of Approval (if any):	W2 +		326-770