Submit 3 Copies To Appropriate District Office	State of New M		,	Form C-103
District I	Energy, Minerals and Natural Resources		May 27, 2004	
1625 N. French Dr., Hobbs, NM 88240 District II			WELL API NO. 30-045-33218	
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease	
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE 🖂	FEE 🗍
District IV	Santa Fe, NM 87505		6. State Oil & Gas Leas	
1220 S. St. Francis Dr., Santa Fe, NM 87505		W. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
CUDIDDA NOT	ICES AND REPORTS ON WEE	ES a	☐. Lease Name or Unit A	Agreement Name
(DO NOT USE THIS FORM FOR PROPODIFFERENT RESERVOIR. USE "APPLIT PROPOSALS.)	DSALS TO DRILL OR TO DEEPEN OR	PLUG BACK TOMANO	Valentine G	
1. Type of Well: Oil Well	Gas Well Other	- MST DIV	8. Well Number	
2. Name of Operator	The state of the s	C's	9. OGRID Number	
BP AMERICA PRODUCTION	COMPANY	1655	√000778	
3. Address of Operator		SEROID BY	10. Pool name or Wildc	
P.O. BOX 3092 HOUSTON, TX	77079-2064		Basin Dakota & Blanco	Mesaverde
4. Well Location			,	
Unit Letter C:		line and 242	o feet from the West	line
Section 32	Township 32N	Range 10W	NMPM SAN JU	AN County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5984'			11	
Pit or Below-grade Tank Application □ or Closure □				
Pit typeDepth to GroundwaterDistance from nearest fresh water well Distance from nearest surface water				
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK		REMEDIAL WORK		RING CASING
TEMPORARILY ABANDON ☐ PULL OR ALTER CASING ☐	_	COMMENCE DRII		DA .: D
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	JOR 🗆	
OTHER: Requested Information	\boxtimes	OTHER:		П
	pleted operations. (Clearly state a	Il pertinent details, and		
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion				
or recompletion.				
08/17/06 PRS TEST 5 1/2" CSG &	3 1/2" LINER & LINER TOP PI	KR TO 2500 PSI. FOR	30 MIN. TEST OK.	
I hereby certify that the information	above is true and complete to the	best of my knowledge	and belief. I further certify	v that any nit or helow-
grade tank has been/will be constructed or	r closed according to MOCD guideline	s □, a general permit □	or an (attached) alternative OC	CD-approved plan □.
SIGNATURE Surfine	TITLE	Regulatory Analyst	DATE <u>08/31/06</u>	
Type or print name Visiting Hards	E mail address. Vuictice 1	nuuta@hm oo	Tolombono Nr. 201 266	
Type or print name Kristina Hurts For State Use Only	E-mail address: Kristina.ł	iuris@pp.com	Telephone No. 281-366-3	<u>800</u>
Tot State Osc Only	, .	EPUTY OIL & GAS INS	PECTOR, DIST. 🚱	SEP 0 5 2006
APPROVED BY: /- Vill	anners TITLE	And	DAT	E