

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103

June 19, 2008

RECEIVED

OIL CONSERVATION DIVISION

AUG 26 2009 1220 South St. Francis Dr.

Santa Fe, NM 87505

MOBBSOCD

WELL 30-025-25702 API NO.

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

L-6315

7. Lease Name or Unit Agreement Name

LEA, 7406 JV-S

8. Well Number 002

9. OGRID Number 003019

10. Pool name or Wildcat

SCARBOROUGH, WEST

Comanche, Staked

Tan Yaks - 7Rw.

Qn

SUNDRY NOTICES AND REPORTS ON WELLS
(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)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator

BTA OIL PRODUCERS

3. Address of Operator

1045 SOUTH PECOS MIDLAND, TX 79701

4. Well Location

Unit Letter N : 2310 feet from the WEST line and 330 feet from the SOUTH lineSection 28 Township 26S Range 36E NMPM LEA County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐PLUG AND ABANDON ☒TEMPORARILY ABANDON ☐CHANGE PLANS ☐PULL OR ALTER CASING ☐MULTIPLE COMPL ☐DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐P AND A ☐CASING/CEMENT JOB ☐OTHER: ☐OTHER: ☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1) MIRU-PLUGGING EQUIPMENT AND STEEL PITS

2) ND WELLHEAD-NU BOP-SET CIBP @ 3115'-CIRC PLUGGING MUD-SPOT 15 SXS ON TOP CIBP

3) SPOT 25 SXS @ 2204'

4) PERF AND SPOT 30 SXS @ 1451'

5) PERF AND SPOT 20 SXS @ 60' AND CIRCULATE TO SURFACE

6) CUT OFF WELLHEAD, CUT OFF ANCHORS. COVER CELLAR, CLEAN LOCATION, AND MOVE OUT

The Oil Conservation Division **Must be notified****24 hours prior** to the beginning of plugging operations

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

Monty Beckham

TITLE

President

DATE

8-24-09

Type or print name

Monty Beckham

E-mail address:

PHONE:

575-390-2076

For State Use Only

APPROVED BY:

Mark Whitaker

TITLE

Compliance Officer

DATE

09/02/2009

Conditions of Approval (if any):