Form 3160-5 (September 2001)

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

OCD-ARTESIA

FORM APPROVED OMB NO. 1004-0135 Expires January 31, 2004

5. Lease Serial No.

No. 675604

UNDRY	NO	TICES	AND	REP	ORTS	ON	WELLS	
	_							

SUNDKI NUTICES	6. If Indian, Allottee or Tribe Name 7. If Unit or CA/Agreement, Name and/or No.							
Do not use this form for abandoned well. Use For								
SUBMIT IN TRIPLICATE -								
1. Type of Well X Oil Well Gas Well Other		APR_	2 3 2004	8. Well Nam				
2. Name of Operator BP America Production Company		96B-4	ARTESIA	nMn				
3a. Address		3b. Phone No. (include ar	rea code)	9. API Well No. 30.015.00843				
P.O. Box 1089 Eunice NM 88231		505.394.1600		10. Field and Pool, or Exploratory Area				
4. Location of Well (Footage, Sec., T., R., M., or Survey	Description)			Empire Al	x			
UL H, 1980' FNL & 560' FEL Section 9, T18S, R27E				11. County	or Parish, State			
12. CHECK APPROPRIATE	BOX(ES) TO INC	DICATE NATURE OF	NOTICE, REP	ORT, OR O	THER DATA			
TYPE OF SUBMISSION		TYI	TYPE OF ACTION					
Notice of Intent	Acidize	Deepen	Production	action (Start/Resume) Water Shut-Off				
Files www.p.	Alter Casing	Fracture Treat	Reclamatio	n	X Well Integrity			
Subsequent Report	Casing Repair	New Construction	Recomplet	te	X Other MTT			
Final Abandonment Notice	Change Plans	Plug and Abandon	Temporaril	ly Abandon				
	Convert to Injection	on Plug Back	Water Disp	sposal				
12.11.03: Load and test csg to ! witnessed by BLM CFO. EP America Production that there is workover TA status is therefore	5546-5632' CIB 525# psi. Held Kerox copy of Company has eva r potential in to requested in o tation of anothe	30 mins. Held OK. chart attached. luated this wellbooke Abo formation. rder to complete the workover program vide funding.	re and has d Permission he present w will requir	determined to retain workover a re time to	nd o			
		A	ccepted for re	ecord - NM	OCD			
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)		Title						
Kellie D. Murrish		Staff	Support					
Run H. Munis		Date 01.05.04						
	S SPACE FOR FED	ERAL OR STATE OF	FICE USE					
Approved by /s/ Joe G. Lara	1	Title Pe	t. 2~ e		Date 4/23/04			
Conditions of approval, if any, are attached. Approval certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations t	those rights in the subj	iert lesse	RLSBAD F	TELD O)FFICE			

