

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103

Revised May 08, 2003

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO.

30.015.00676

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil &amp; Gas Lease No.

7. Lease Name or Unit Agreement Name:

EMPIRE ABO UNIT 'H'

8. Well No.

17

9. OGRID Number

00078

10. Pool name or Wildcat

EMPIRE ABO

## 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

RECEIVED

MAY 04 2004

2. Name of Operator

BP America Production Company

3. Address of Operator

P.O. Box 1089 Eunice NM 88231

4. Well Location

Unit Letter M : 330 feet from the S line and 990 feet from the W lineSection 36 Township 17S Range 27E NMPM County EDDY

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

3641' RDB

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 COMPLETION ☐OTHER: ☐

## SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐CASING TEST AND CEMENT JOB ☐OTHER: RETURN TO PRODUCTION ☒

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.

TD: 5797' PBD: 5794' PERFS: 5707-5670'

10.07.02: Well SI after workover operations.

03.17.04: Attempt to flow well. Test date: 03.22.04 = 25 MCF, 0 BO, 0 BW.

04.12.04: Convert well to rod pump. Return well to production.

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

SIGNATURE

TITLE

Staff Support

DATE 05.03.04

Type or print name Kellie D. Murrish

Telephone No. 505.394.1649

(This space for State use)

APPROVED BY

TITLE

DATE

Conditions of approval, if any: