



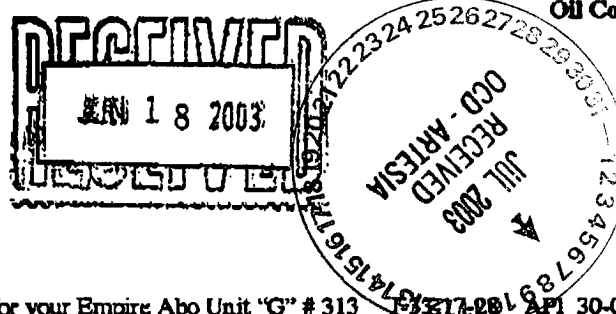
NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

BILL RICHARDSON
Governor
Joanna Prukop
Cabinet Secretary

Lori Wrotenbery
Director
Oil Conservation Division

16 June 2003

BP America Production
P.O. Box 1089
Eunice, New Mexico 88231



Handwritten: OK for Release
6/16/03
OK

Form C-103 Report of Plugging for your Empire Abo Unit "G" # 313
Cannot be approved until an NMOCD representative has made an inspection of the location and found it to be cleared to comply with OCD rules and regulations. Please check each item in the space provided to indicate that the work has been accomplished and the location is ready for final inspection.

- 1. All pits have been filled and leveled.
- 2. Rat hole and cellar have been filled and leveled.
- 3. A steel marker 4" in diameter and approximately 4' above mean ground level has been set in concrete to mark the exact location of the plugged well. (Marker must have operator name, lease name, well number and location including quarter/quarter section or unit letter, section, township, range and API well ID number permanently welded, stamped or otherwise engraved into the metal marker.)
- 4. The location has been leveled as nearly as possible to original top ground contour and has been cleared of all junk and equipment.
- 5. The dead men and tie downs have been cut and removed.
- PA* 6. If a one well lease or last remaining well on lease, the battery and burn pit locations have been leveled and cleared of all junk & equipment.
- 7. All environmental concerns have been addressed as per OCD guidelines.

The above are minimum requirements and no plugging bond will be cancelled until all locations for plugged and abandoned wells have been inspected and Form C-103 approved.

When all of the work outlined above has been done, please notify this office by completing, signing and returning this letter to us so that our representative will not have to make more than one trip to the location.

I certify that the above work has been done and the above-mentioned lease is ready for OCD inspection and approval.

Handwritten signature: Kent Whitmore
Name
Handwritten signature: Antone Tom Leadu
Title

Handwritten signature: Van Barton
Van Barton
Field Rep. II

Handwritten: Inactive MKL
06.20.03
FAX: EAU

Submit 3 Copies
to Appropriate
District Office



State of New Mexico
Energy Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240-1980
DISTRICT II
P.O. Drawer DD, Artesia, NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30.015.22592
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Empire Abo Unit "G"
8. Well No. 313
9. Pool name or Wildcat Empire Abo
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3662.5' GR

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER
2. Name of Operator BP America Production Company
3. Address of Operator P.O. Box 1089 Eunice, NM 88231
4. Well Location Unit Letter <u>J</u> : <u>2000</u> Feet From The <u>S</u> Line and <u>2450</u> Feet From The <u>E</u> Line Section <u>33</u> Township <u>17S</u> Range <u>28E</u> NMPM <u>Eddy</u> County

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. 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.

TD: 6360' PBD: 6307' PERFS: 5692-5728'
05.07.03: MIRUPU. NDWH. NUBOP.
05.09.03: RIH & tag CIBP @ 5667'. Circ hole w/9.5# mud.
05.12.03: Spot 25 sxs cmt @ 5667'. PUH to 3539'. Spot 25 sxs cmt. POH to 790'. Spot 50 sxs cmt. POH w/tbg. WOC.
05.13.03: Tag plug @ 313'. POH. NDBOP. NU well w/2 jts. Circ 10 sxs 60' cmt plug to surf. RDPU. Clan location. Cut off wellhead. Install dry hole marker. Well P&A'd.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE Kellie D. Murrish TITLE Sr. Administrative Assistant DATE 06.12.03
TYPE OR PRINT NAME Kellie D. Murrish TELEPHONE NO. 505.394.1649

(This space for State Use)
APPROVED BY [Signature] TITLE Field Rep DATE APPROVED JUL 16 2003
CONDITIONS OF APPROVAL, IF ANY: