

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N French Dr., Hobbs, NM 87240  
District II  
1301 W Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

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



WELL API NO. 30-015-22525
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 647-349, 647-351
7. Lease Name or Unit Agreement Name: Empire Abo Unit 'G'
8. Well Number 322
9. OGRID Number 000778
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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	IAN 16 2008
2. Name of Operator BP America Production Company	OCD-ARTESIA
3. Address of Operator P.O. Box 1089 Eunice NM 88231	
4. Well Location Unit Letter <u>I</u> : <u>2350</u> feet from the <u>S</u> line and <u>1100</u> feet from the <u>E</u> line Section <u>33</u> Township <u>17S</u> Range <u>28E</u> NMPM County <u>EDDY</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3665.6' GR	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance 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 <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: MIT <input checked="" type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details of starting any proposed work). SEE RULE 1103. For Multiple Completion or recompletion.

TD: 6250' CIBP: 5990' PERFS: 6032'-6140'

**FINAL T/A EXTENSION**

Date of Last Production 3/1/1998 late  
Well must be returned to beneficial use or a tion  
P/A plan submitted prior to 7/17/2008

12/20/07: Load and test casing to 550# psi. Held 30 mins. Ending pressure 540# psi. Test performed by Richard Inge of NMOCD. Original chart retained by Richard Inge.

BP America Production Company requests permission to retain TA status of this well.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Barry Price TITLE Area Operations Team Lead DATE 01/11/08  
E-mail address: barry.price@bp.com  
Type or print name Barry Price Telephone No. 575-394-1648

**For State Use Only**

APPROVED BY Richard Inge TITLE Compliance Officer DATE 1/17/2008  
Conditions of Approval, if any: