Form 3160-5 (September 2001)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

	OCD-An	FORM APPROVED OMB No. 1004-0135 Expires: January 31, 200
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5. Lease Serial No.

6.	If In	匠	H	P	R	E r	AB	O rr	UN	VIT	,

		p		D 77		VM-70945		
SUBMIT IN TR	BLIGATE BOTHER INSTITU	dions on	everse ste	9		Agreement, Name and/or No.		
1. Type of Well								
Oil Well Gas Well	Other			<u> </u>	8. Well Name a			
Name of OperatorBP America Production Company	v		REC	CEIVED	Empire Abo U 9. API Well No			
Ba. Address		3b. Phone N	o. (include area JAN		30.015.22833	•		
P.O. Box 1089, Eunice, NM 882	31	505.394.164	JAN O	2 8 2004		ol, or Exploratory Area		
Location of Well (Footage, Sec.,		1505.551.10	OCD-ARTESIA			Empire Abo		
Unit Letter D, 450' FNL & 1175'					rish, State			
Section 11, T18S, R27E					Eddy, NM			
12. CHECK API	PROPRIATE BOX(ES) TO	INDICATE	NATURE C	F NOTICE, RI	EPORT, OR O	HER DATA		
TYPE OF SUBMISSION			TYPE C	F ACTION				
	Acidize [Deepen		Production (Start	/Resume)	Water Shut-Off		
☐ Notice of Intent	Alter Casing	Fracture T	reat 🔲	Reclamation		Well Integrity		
Subsequent Report	Casing Repair	New Cons	truction 🔲	Recomplete	\square	Other MIT		
	Change Plans	Plug and A	=	Temporarily Aba	andon			
Final Abandonment Notice	Convert to Injection	Plug Back	<u> </u>	Water Disposal				
following completion of the invo	FS: 5966-5976' #. Held 30 mins. Casing test way has evaluated this wellbore an ested in order to complete the c	esults in a mul filed only after vitnessed by (d has determ	tiple completion all requirement Clark Bennett, ined that there wer and PA pro	n or recompletion in its, including reclar BLM CFO. Xero is workover poteogram, and development.	n a new interval, a least on, have been of the control of the cont	form 3160-4 shall be filed once ompleted, and the operator has ttached. The program which will		
14. 1 hereby certify that the foregoin Name (Printed!Typed) Kellie D. Muntish Signature Approved by (Signature)	J. Y Junal HISSPACE FO /s/ Joe G. Lar	a	Name (Printe	OFFIGA USE	S G. Lara _{Titl}	- ()		
Conditions of approval, if any, are certify that the applicant holds legs which would entitle the applicant to c	attached. Approval of this notice all or equitable title to those rights conduct operations thereon.	does not war in the subjec	ant or serice	CFO		1/26/04		

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

