

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT -" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other  
2. Name of Operator  
BP America Production Company  
3. Address and Telephone No.  
P.O. Box 1089, Eunice, NM 88231 505-394-1649  
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Unit Letter J, 1980' FSL & 1780' FEL  
Section 3-T18S-R27E

5. Lease Designation and Serial No.  
6. If Indian, Allottee or Tribe Name  
7. If Unit or CA, Agreement Designation  
8910138010  
8. Well Name and No.  
Empire Abo Unit "K" 11  
9. API Well No.  
30-015-00747  
10. Field and Pool, or exploratory Area  
Empire Abo  
11. County or Parish, State  
Eddy NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☐ Other Workover  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

TD: 5881' PBD: 5844' PERFS: 5650-5368'

MIRUPU NDWH NUBOP

POH w/tbg.

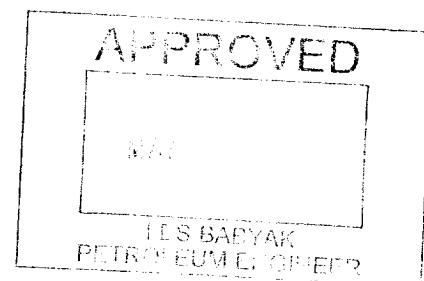
RIH w/bit & scraper to PBTD.

Perf w/2 JSPF 5392-5626'. POH.

PPI perfs w/50 gals/ft. 15% hCL NEFE. POH

RIH w/production assy. NDBOP NUWH

Swab for test. Return well to production.



14. I hereby certify that the foregoing is true and correct

Signed [Signature] Title Sr. Administrative Assistant Date 05.16.02

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Conditions of approval, if any:

