32. 2324 25 26 3	C151
Submit 3 Copies State of New Mexico	Form C-103
to Appropriate Energy, Minerals and Natural Resources Department of the Propriate District Office State Offic	nevided 1 107
DISTRICT RECEIVED OIL CONSERVATION DIVISION P.O. Box 1980 P.O. Box 198	WELL API NO.
DISTRICT II Santa Fe, NM 87505 P.O. Drawer DD, Aresia, NM 88210	30 · 015 · 02601 5. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	STATE X FEE 6. State Oil & Gas Lease No.
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.)	7. Lease Name or Unit Agreement Name Empire Abo Unit "J"
1. Type of Well: OIL GAS WELL WELL OTHER	
2. Name of Operator BP America Production Company	8. Well No. 28
3. Address of Operator P.O. Box 1089 Eunice, NM 88231	9. Pool name or Wildcat Empire Abo
4. Well Location Unit Letter H: 1650 Feet From The North Line and 99	
Tect Total Title	Teet from the take
Section 5 Township 185 Range 28E 10. Elevation (Show whether DF, RKB, RT, GR, etc. 3664' DF	COMIT
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING CASING TEST AND CE	MENT JOB
OTHER: OTHER: Temporari	y Abandon X
12. Describe Proposed or Completed Operation (Clearly state all pertinent details, and give pertinent work) SEE RULE 1103.	dates, including estimated date of starting any proposed
TD: 6316' PBD: 6280' PERFS: 6192'-6218'	
9-30-02 Pulled out of hole and lay down rods and tbg. Not economical Move rods and tbg. to yard.	al to produce.
All terms of Rule 203 must be met for this well to placed in Temporary Abandonment status.	
status.	
I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Administrative /	Assistant DATE10/22/02
I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE	Assistant DATE 10/22/02 TELEPHONE NO. 505-394-1650
I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE	