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Submit 3 Copies To Appropriate District Office District Energy, Minerals and 1625 N. French Dr., Hobbs, NM 88240	Natural Resources Revised March 25, 1999
District II 811 South First, Artesia, NM 87210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 OIL CONSERVAT 1220 South St.	Francis Dr. 5. Indicate Type of Lease
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WE (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN O DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-10 PROPOSALS.) 1. Type of Well:	R PI LIG BACK TO A
Oil Well X Gas Well Other 2. Name of Operator	8. Well No.
Bird Creek Resources, Inc. 3. Address of Operator 1437 S Boulder Suite 930 Tulsa, Ok. 74	9. Pool name or Wildcat
4. Well Location	
Unit Letter N : 660 feet from the S line and 1980 feet from the W line	
Section 25 Township 23—S Range 28—E NMPM Eddy County 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 2993 GL 11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON	SUBSEQUENT REPORT OF: REMEDIAL WORK ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS. PLUG AND
PULL OR ALTER CASING	CASING TEST AND ABANDONMENT CEMENT JOB
OTHER:	OTHER:
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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. 11-08-01-Set CIBP @ 6000'. Load csg w/fresh wtr. Test 4 1/2" csg to 1000 psi, 15 mins Perf 4 holes @ 450'. Press csg to 1200 psi to circ. 4 1/2 X 8 5/8 annulus. Could not circ. Got NMOCD ok to plug 4 1/2" csg. Ran 2 3/8" tbg to 5990'. 11-09-01-Spot 135 sk class "C" cmt plugs 6000'-4000' & 4000'-2000', 68 sk plug @ 1000' surface. Lay down tbg, cut off well head & install marker. NMOCD representative, Phil Hawkins, observed plugging operations.	
P.M.	
Ost buy	RECEIVED 25678
Thereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE Editor Cholocides TITLE Engineer S, 1915171617 DATE 11-14-01	
Type or print name Edward 0. Holloway (This space for State use)	Telephone No. 918-582-7713
APPPROVED BY Conditions of approval, if any:	Compliance DATE 2-28-01
FF-/,,	Officer