Revised 1-1-89

State of New Mexico Submit 3 Copies to Appropriate District Office Energy, Minerals and Natural Resources Department DISTRICT OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 WELL API NO. P.O. Box 2088 DISTRICT II Santa Fe, New Mexico 87504-2088 30-015-26277 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease FEE X DISTRICT III STATE 1000 Rio Brazos Rd., Aztec, NM 87410 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" 7. Lease Name or Unit Agreement Name (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: GAS WELL MET X OTHER Pardue -C-, 8808 JV-P 2. Name of Operator 8. Well No. BTA OIL PRODUCERS 3. Address of Operator 9. Pool name or Wildcat 104 South Pecos, Midland, Texas 79701 Loving East (Delaware) 4. Well Location Unit Letter _M- : 560 Feet From The South 660 Line and Feet From The West Line Section 23-S Township 28-E Range Eddy **NMPM** County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3,017' GR 3,028' RKB Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT 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 CEMENT JOB X OTHER: OTHER: 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed TD 6,250' Cmt'd 5 1/2" 15.5 & 17# J55 - LTC csg @ 6,250' w/ 1317 sx. 3-4-90 1017 sx Halliburton lgt w/ 15# / sx salt; 5# / sx Gilsonite; 1/4 # / sx Flocele & 0.6% Halad 9. (1.98 Ft 3/ sx; 13.1 ppg) 300 sx Cl -H-(1.18 Ft 3 /sx; 15.6 ppg) Cmt Circ. Set Slips & cut-off. WOC. 3-5-90 Released rig 1:00 A.M. MORT Prep to complete

I hereby certify that the information above is fine and complete to the hest of my prown	edge-and belief.	
SIGNATURE A BULLEY WALLEY WALLEY	mme Regulatory Administrator	DATE _3/5/90
TYPE OR PRINT NAME DOROTHY HOUGHTON		TELEPHONE NO. 915/682-375
(This space for State Use) ORIGINAL SIGNED BY		<u> </u>
MIKE WILLIAMS SUPERVISOR, DISTRICT IS	— TITLE —	MAR 1 2 1990
CONDITIONS OF APPROVAL P ANY:		
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