

Submit 3 Copies
to Appropriate
District Office

STATE OF NEW MEXICO
En. Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-015-29849

5. Indicate Type of Lease
STATE ☐ 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.)

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
BK EXPLORATION CORPORATION

3. Address of Operator
810 S. CINCINNATI, STE. 208 TULSA, OK 74119

4. Well Location
Unit Letter A : 360 Feet From The NORTH Line and 330 Feet From The EAST Line
Section 21 Township 23-S Range 28-E NMPM EDPY County

5. Well No.
1

6. Pool name or Wildcat
CULEBRA BLUFF BONE SPRING, S.

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3020' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

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 ☒	
OTHER: ☐		OTHER: "VERTICAL WELL" ☐	

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.

Drilled 7.875" hole @ 420-6400'. Ran open hole logs. Logging tool stuck.
Retrieved logging tool. Reran bit, cleaned out to TD. Ran 5.5" J-55
(R-2 and R-3) casing as follows: 17# @ 4018-6400'
15.5# @ 82-4018'
17# @ 0-82'

By BJ Services, cemented 5.5" csg. w/ 240 sxs. class "C" cmt. (1/4 pps
cello flakes, 5 pps salt, 1.35 yield). WOC. Set slips. Rigged down WEK #3.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Brad D. Burks TITLE VICE-PRESIDENT DATE 10-27-1997

TYPE OR PRINT NAME BRAD D. BURKS 918-582-3855 TELEPHONE NO.

(This space for State Use)
ORIGINAL SIGNED BY JIM W. GUM
DISTRICT II SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

JAN 15 1998