

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87200
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised March 25, 1999

WELL APPLIC. NO. 30-015-31815

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:
WEST BRUSHY STATE "8"

8. Well No.
1

9. Pool name or Wildcat
BRUSHY DRAW (DELAWARE)

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
2894' GR

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
BP America Production Company

3. Address of Operator
501 Westlake Park Blvd, Rm 5.172 Houston, TX 77079

4. Well Location
Unit Letter B : 1219 feet from the NORTH line and 1894 feet from the EAST line
Section 8 Township 26S Range 29E NMPM County EDDY

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: Drilling permit extension

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐

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.

Drilling permit was approved on 6/4/01. On 8/6/01, well location was changed to unorthodox location (@ location shown above). The location was approved on 8/12/01: Administrative Order NSL-4632.

Request to extend drilling permit for an additional year.

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

SIGNATURE Amy T. Spang TITLE REGULATORY COMPLAINT ANALYST DATE 5/30/02

Type or print name AMY T. SPANG

Telephone No. 281-366-7655

(This space for State use) **ORIGINAL SIGNED BY TIM W. GUM**
DISTRICT II SUPERVISOR

APPROVED BY [Signature] TITLE _____ DATE AUG 26 2002
Conditions of approval, if any: