| Submit 3 Copies To Appropriate District                                      |                            | State of New Mex         | ico                    | Form C-103     |                |                      |              |
|--|----------------------------|--------------------------|------------------------|----------------|----------------|----------------------|--------------|
| Office   | Energy,                    | Revised March 25, 1999   |                        |                |                |                      |              |
| District I   | Lifergy,                   | WELL API NO.             |                        |                |                |                      |              |
| 625 N. French Dr., Hobbs, NM 88240<br>District II                            | OIL C                      | 30-045-26300             |                        |                |                |                      |              |
| 311 South First, Artesia, NM 88210   |                            |                          | te Type of I           | Lease          |                |                      |              |
| District III<br>1000 Rio Brazos Rd., Aztec, NM 87410                         | 1220 South St. Francis Dr. |                          |                        |                | ATE            | FEE 🗙                |              |
| District IV  | Santa Fe, NM 87505         |                          |                        | 6. State       | Oil & Gas      | Lease No.            |              |
| 1220 S. St. Francis Dr., Santa Fe, NM  |                            | #AC-144                  | 1AY 1003               |                |                |                      |              |
| 87505<br>SUNDRY NO   | TICES AND RE               | PORTS ON WELLS           | 3 3 3                  | 7. Lease       | Name or U      | Init Agreement Nam   | e:           |
| - A MORNIOR THIS CORM FOR DROP   | DIRIG OT 2 1A2O            | OR TO DEEPEN OR PEG      | O BACK BOLA            |                |                |                      |              |
| DIFFERENT RESERVOIR. USE "APPI   | JICATION FOR PE            | RMIT" (FORM C-101) FO    | R SULCH                |                |                |                      |              |
| PROPOSALS.)  |                            |                          |                        |                | Ulibarr        | i Gas Com            |              |
| 1. Type of Well: Oil Well Gas Well   | Other                      |                          |                        |                |                |                      |              |
| 011 11 411   | _A Other                   |                          | - Pr. 1, 1, 1, 1, 2, 2 | 8. Well        | No.            |                      |              |
| 2. Name of Operator  | n.,                        | Attn: Mary Co            | rley                   | _              |                | 3E                   |              |
| BP America Production Compar   | <u>.y</u>                  | 7.11.11                  |                        | 9. Pool r      | name or Wi     |                      | İ            |
| 3. Address of Operator   | 77253                      |                          |                        |                | Blanco         | Mesaverde            |              |
| P.O. Box 3092 Houston, TX<br>4. Well Location                                | 77233                      |                          |                        |                |                |                      |              |
| 4. Well Location   |                            |                          |                        |                |                |                      |              |
| Unit LetterI   | 1340 feet                  | from theSouth            | line and <b>1255</b>   | feet from th   | ne <u>East</u> | line                 |              |
| Olit Better  |                            | <del></del>              |                        |                |                | _                    |              |
| Section 35   | Township                   | 30N Range                | 09W                    | NMPM_          | San Juar       | n County             | THE S        |
|  | 10. Elevat                 | tion (Show whether Di    | R, RKB, RT, GR, et     | c.)            |                |                      |              |
|  |                            | 564                      | 10'                    |                |                | <u> </u>             | المعوا سيحان |
| 11. Check  | Appropriate                | Box to Indicate N        | ature of Notice,       | Report o       | r Other L      | Data                 |              |
| NOTICE OF INTENTION TO:  |                            |                          |                        | SOEGUE         | NT REP         | OKI OF.              | · 🗀          |
| PERFORM REMEDIAL WORK  | ☐ PLUG AND                 | ABANDON                  | REMEDIAL WOR           | RK             |                | ALTERING CASING      | لسان         |
| TEN ON TEMPERATURE   |                            |                          | a contract DE          | NULLING OF     | NIC []         | PLUG AND             |              |
| TEMPORARILY ABANDON  | ☐ CHANGE F                 | PLANS                    | COMMENCE DE            | CILLING OF     | 143. 🔲         | ABANDONMENT          |              |
| PULL OR ALTER CASING   |                            |                          |                        | AND            |                |                      |              |
| PULL OR ALTER CASING   | COMPLET                    |                          | CEMENT JOB             |                |                |                      |              |
| OTHER:   | 00 == :                    |                          |                        |                |                |                      | $\square$    |
|  |                            |                          | OTHER: Plug D          | akota & Re     | complete       | into Mesaverde       | <u> </u>     |
| 12. Describe proposed or com   | nleted operation           | s. (Clearly state all pe | rtinent details, and   | give pertir    | ient dates,    | including estimated  | aate         |
| <ol> <li>Describe proposed or com<br/>of starting any proposed we</li> </ol> | ork). SEE RULI             | E 1103. For Multiple     | Completions: Atta      | ich wellbor    | e diagram (    | of proposed complet  | ion          |
|  |                            |                          |                        |                |                |                      |              |
|  | roduction Comp             | any submitted for you    | ur approval a Sund     | lry Notice     | of our inte    | ent to abandon the   | 2            |
|  |                            |                          |                        |                |                |                      | the          |
| however after evaluation of 1  | the CBL ran duri           | ing the process a dec    | ision was made to      | stop the r     | ecompletio     | in process and leave | 1110         |
| well in a Temporary Abandonn   | ient status pend           | ling further evaluation  | n.                     |                |                |                      |              |
|  |                            |                          |                        | امط امما       | a w/2% Kc      | I WTR & test CSG     | to           |
| 04/08/2002 MIRUSU. NDW   | H NU BOP. TO               | H w/TBG. TIH w/C.        | IBP & set @ 6610       | . Load not     | us from 60     | 100' - 5900' TOH.    | RU           |
|  |                            |                          | וונאמי אי שומח ווע     | 20 C/N   DI    | 10 11 OH O     | ,,,,                 |              |
|  |                            |                          |                        |                |                |                      |              |
|  | M 1/ 1 W/TEN Dag           | Toct / 5/4 TO 7000       | H IESLUK. IU           | 11. 000 10     |                |                      |              |
| set @ 5512'. Rolled hole w/2' was made to stop the recomp                    | letion process.            | TIH W/TBG & land @       | 5460 . NO BOES.        | 140 1111.      |                | .,                   |              |
|  |                            |                          |                        |                |                |                      |              |
| Well temporarily abandoned.  |                            |                          |                        |                |                |                      |              |
| ,  |                            |                          |                        |                |                |                      |              |
| I hereby certify that the form   | anon above is tr           | rue and complete to th   | e best of my know      | ledge and b    | elief.         |                      |              |
| Thereby certify that the   |                            |                          |                        |                |                | o = (01 /2002        |              |
| SIGNATURE MALLY A  | rll1                       | TITLE_                   | Sr. Regulatory A       | nalyst         | _ DATE         | 05/01/2002           |              |
|  | Corley                     |                          |                        | Telep          | hone No.       | 281-366-4491         |              |
| Type or print name Mary  | COLIEY                     |                          | SERVITY AS D TIXE      | 2 <b>9</b> 855 |                |                      |              |
| (This space for State use)   |                            |                          | · *** ***              |                | t er e speciel | ' MAY -721           | 102          |
|  | e e i Milit                | TITLE                    |                        |                |                | DATE                 |              |
| APPPROVED BY   |                            |                          |                        |                |                |                      |              |