State of New Mexico Form C-103 Submit 3 Copies To Appropriate District Office Energy, Minerals and Natural Resources Revised May 08, 2003 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30.015.01715 District II OIL CONSERVATION DIVISION 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III STATE X FEE  $\square$ 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 1220 S. St. Francis Dr., Santa Fe, NM 87505 E-7116 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A (DO NOT USE THIS FURM FUR PROPOSALS TO DIVILE ON TO DESCRIPTION FOR PERMIT" (FORM C-101) FOR SUGE Empire Abo Unit "F" PROPOSALS.) 8. Well No. 1. Type of Well: Oil Well X Gas Well Other 2. Name of Operator 9. OGRID Number 00778 BP America Production Company 10. Pool name or Wildcat 3. Address of Operator P.O. Box 1089 Eunice NM 4. Well Location Gist to Sline and 1966 1939 Unit Letter feet from the feet from the\_ line **NMPM** County Eddy Section Township 17S Range 28E 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3665' GR 12. 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** CASING TEST AND PULL OR ALTER CASING MULTIPLE **CEMENT JOB** COMPLETION OTHER: OTHER: MIT 13. 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 recompletion. TD: 6300' PBD: 6100' PERFS: 6054-6064' PKR: 5980' 10.14.03: Load and test casing to 560# psi. Held 30 mins. Casing test was not witnessed by a NMOCD representative. Chart attached. BP America Production Company has evaluated this wellbore and has determined that these is production potential in the Abo formation. Permission to retain TA status is therefore requested in order to complete our current workover program and develop another workover program which will require interest owner approval to Temporary Abandonad Status Epiproxed provide funding.

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

SIGNATURE

TITLE

Staff Support

DATE

10.24.03

Telephone No. 505.394.1649

(This space for State use)

APPROVED BY\_\_\_\_\_\_\_Conditions of approval, if any:

TITLE

APPROVED OCT 2 8 2003

