



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

BILL RICHARDSON

Governor

Joanna Prukop

Cabinet Secretary

Lori Wrotenbery

Director

Oil Conservation Division

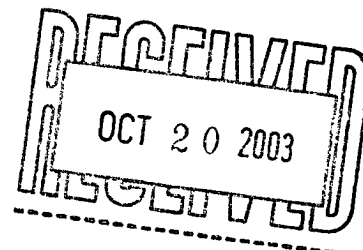
16 October 2003

BP America Production
P.O. Box 1089
Eunice, New Mexico 88231

RECEIVED

JAN 12 2004

OCD-ARTESIA



Form C-103 Report of Plugging for your Empire Abo Unit F" # 32 H-33-17-28 API 30-015-01694
Cannot be approved until an NMOCD representative has made an inspection of the location and found it to
be cleared to comply with OCD rules and regulations. Please check each item in the space provided to
indicate that the work has been accomplished and the location is ready for final inspection.

- ☒ 1. All pits have been filled and leveled.
- ☒ 2. Rat hole and cellar have been filled and leveled.
- ☒ 3. A steel marker 4" in diameter and approximately 4' above mean ground level has been set in
concrete to mark the exact location of the plugged well. (Marker must have operator name, lease name,
well number and location including quarter/quarter section or unit letter, section, township, range and API
well ID number permanently welded, stamped or otherwise engraved into the metal marker.)
- ☒ 4. The location has been leveled as nearly as possible to original top ground contour and has been
cleared of all junk and equipment.
- ☒ 5. The dead men and tie downs have been cut and removed.
- ☒ 6. If a one well lease or last remaining well on lease, the battery and burn pit locations have been
leveled and cleared of all junk & equipment.
- ☒ 7. All environmental concerns have been addressed as per OCD guidelines.

The above are minimum requirements and no plugging bond will be cancelled until all locations for
plugged and abandoned wells have been inspected and Form C-103 approved.

When all of the work outlined above has been done, please notify this office by completing, signing and
returning this letter to us so that our representative will not have to make more than one trip to the location.

I certify that the above work has been done and the above-mentioned lease is ready for OCD inspection and
approval.

Name

Title

Van Barton
Field Rep. II

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88201
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised June 10, 2003

WELL API NO. 30.015.01694
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name EMPIRE ABO UNIT "F"
8. Well Number
9. OGRID Number 000778
10. Pool name or Wildcat EMPIRE ABO

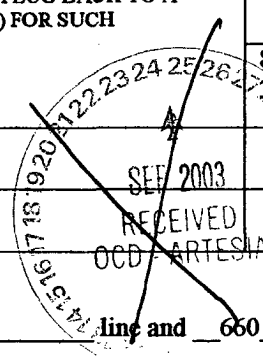
SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
Oil Well ☐ Gas Well ☐ Other ☐

2. Name of Operator
BP AMERICA PRODUCTION COMPANY

3. Address of Operator
P.O. BOX 1089, EUNICE, NM 88231

4. Well Location
Unit Letter H : 1980 feet from the N line and 660 feet from the E line
Section 33 Township 17S Range 28E NMPM EDDY County



11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3673.5 GR

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND <input checked="" type="checkbox"/> ABANDONMENT
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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: 6280' PB: 6263' PERFS: 5820'-5836'

- MIRU PU ND WH NU BOP
- RIH SET CIBP @ 5810' SPOT 25 SX CMT ON TOP CIRCULATE HOLE W/ 9.5 KCL MUD TEST TO 500#
- SPOT 25 SX CMT @ 3505' WOC TAG PLUG @ 3296'
- RIH WIRELINE PERFORATE CSG @ 1050' POOH RIH W/ PKR AND TBG SET @ 700' PUMP 50 SX CMT WOC
- TAG PLUG @ 925' POOH W/ TBG RIH W/ WIRELINE PERFORATE @ 441' POOH W/ WIRELINE AND RIH W/ PKR AND TBG SET @ 200' PUMP 50 SX CMT WOC TAG PLUG @ 300' POOH
- RIH W/ WIRELINE PERFORATE CSG @ 60' POOH BULL HEAD CMT DOWM 4 1/2" CIRCULATE CMT FOR 60' UP 8 5/8" CSG
- CUT OFF WELLHEAD, ANCHORS CLEAN LOCATION *P4A 09.23.03*

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

SIGNATURE *Jim Pierce* TITLE Wells Team Lead DATE *09.30.03*
Type or print name Jim Pierce E-mail address: Telephone No. (505) *394-1600*
(This space for State use)

APPROVED BY *[Signature]* TITLE *Field Rep ID* DATE *JAN 26 2004*
Conditions of approval, if any: