

Submit 7 Copies To Appropriate District  
 Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 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

Form C-103  
 May 27, 2004

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO. 30-015-26326
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		7. Lease Name or Unit Agreement Name  Pardue -B-, 8808 JV-P
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	8. Well Number 2	
2. Name of Operator BTA Oil Producers	9. OGRID Number 003002	
3. Address of Operator 104 S. Pecos, Midland, TX 79701	10. Pool name or Wildcat Loving, East (Brushy Canyon)	
4. Well Location Unit Letter <u>L</u> : <u>1980</u> feet from the <u>south</u> line and <u>765</u> feet from the <u>west</u> line Section <u>11</u> Township <u>23S</u> Range <u>28E</u> NMPM Lea County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

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

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

BTA proposes the following:

1. MI & RU CU.
2. Hot oil tbg & rods. POH w/rods & pump.
3. PU tbg & tag bttm. POH w/prod tbg.
4. Depending on fill above RBP @ 5817', PU bit & hydrostatic bailer or RBP retrieving tool.
5. RIH. Wash out sand fill. Pull RBP.
6. RIH to check PBSD @ 6166'
7. Run prod equip to pmp from below lowest perf.
8. Put on production.

RECEIVED  
 AUG 25 2004  
 OCS-ARTESIA

Operator to use BCP control device for work

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE Tim W. Gum TITLE Regulatory Administrator DATE 08/20/2004

Type or print name TIM W. GUM E-mail address: \_\_\_\_\_ Telephone No. \_\_\_\_\_  
**For State Use Only** DISTRICT II SUPERVISOR

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE AUG 26 2004

Conditions of Approval (if any):