

Submit 1 Copy To Appropriate District Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

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

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.)		WELL API NO. 30-015-23220
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator BC OPERATING, INC.		6. State Oil & Gas Lease No.
3. Address of Operator P.O. BOX 50820 MIDLAND, TX 79710		7. Lease Name or Unit Agreement Name CARLSBAD PECOS
4. Well Location Unit Letter G : 1980 feet from the NORTH line and 1980 feet from the EAST line Section 29 Township 22S Range 28E NMPM EDDY County		8. Well Number 1
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,042' GL		9. OGRID Number 160825
		10. Pool name or Wildcat

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 checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

BC OPERATING, INC. HEREBY PROPOSES TO REPAIR CASING, P&A EXSISTING PERFORATIONS AND RECOMPLETE THE UPPER MORROW INTERVAL.

SEE ATTACHED, APPLICATION TO PLUGBACK, PROCEDURE AND WELLBORE DIAGRAMS

DENIED

CANNOT TA A WELL THAT WILL NOT PASS AN NM OIL CONSERVATION
PRESSURE TEST. CASING REPAIR MUST BE ARTESIA DISTRICT
DONE PRIOR TO TA TEST. NO OTHER DOCUMENTS
WERE ATTACHED. NOV 21 2016

Spud Date:

Rig Release Date:

RF- 11/21/16

RECEIVED

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

SIGNATURE Sarah Presley TITLE REGULATORY ANALYST DATE 11.17.2016

Type or print name SARAH PRESLEY E-mail address: spresley@bcoperating.com PHONE: 432-684-9696

For State Use Only

APPROVED BY: **DENIED** TITLE **DENIED** DATE

Conditions of Approval (if any):