Office Submit 3 Copies To Appropriate District	State of New	•		Form C-103
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and I	Natural Resources	WELL API NO.	May 27, 2004
District II	OIL CONSERVATI	ON DIVISION		30-015-34347
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.		5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		STATE X FEE 6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 87505			49107	
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.)			7. Lease Name or Unit Agreement Name HORNED TOAD 36 STATE	
	as Well Other		8. Well Number	7
2. Name of Operator BEPCO, L.P.		RECEIVED	9. OGRID Num	ber 001801
3. Address of Operator P.O. BOX 2	2760	JUN 3 0 2006	10. Pool name o	r Wildcat
MIDLAND	, TX 79702-2760	NON-WELL-OW	NASH DRAW	- DELAWARE/BS/AVALO
4. Well Location Unit Letter G : 18	feet from the NO		80 feet fro	om the EAST line
Section 36	Township 24S	Range 29E	NMPM	CountyEDDY
	11. Elevation (Show whether 3098' GL.			
Pit typeDepth to Groundwate		esh water well Dist	ance from nearest sur	face water
Pit Liner Thickness: mil	Below-Grade Tank: Volume	bbls; Co	nstruction Material	
12. Check Ap	propriate Box to Indicat	e Nature of Notice,	Report or Other	· Data
NOTICE OF INT	ENTION TO:	SUB	SEQUENT RE	PORT OF
· · · · · · · · · · · · · · · · · · ·	PLUG AND ABANDON	REMEDIAL WOR		ALTERING CASING
	CHANGE PLANS	COMMENCE DRI		P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	I JOR 🖂	
OTHER:		OTHER:ADD PE		X
13. Describe proposed or comple of starting any proposed work or recompletion.				
PERF DELAWARE 5450' - 5460' 2 FRAC W/35,406 GAL VIKING 3000 RIH W/ 2-7/8" TUBING SET @ 525) & 97,721# 16/30 OTTAWA		0 SHOTS).	
9				
RETURNED WELL TO PRODUCT	ION 6/8/06.			
I hereby certify that the information abgrade tank has been/will be constructed or clo	ove is true and complete to the overset according to NMOCD guideli	ne best of my knowledge nes □, a general permit □	e and belief. I furth or an (attached) alters	ner certify that any pit or below- native OCD-approved plan
SIGNATURE Cind	TITLI	EPRODUCTION CLER	K	DATE 06/27/2006
Type or print name CINDI GOODMA For State Use Only	N E-ma	il address:cdgoodman@	basspet.com To	elephone No. (432)683-2277
FOR I	RECORDS ONLY	_		DA TUL 1 4 2006
APPROVED BY: Conditions of Approval (if any):	TITLI	<u> </u>		_DATE