

Office

Energy, Minerals and Natural Resources

Revised June 10, 2003

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

87505

## OIL CONSERVATION DIVISION

220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30.015.02614

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil &amp; Gas Lease No.

647

7. Lease Name or Unit Agreement Name

Empire Abo Unit "J"

8. Well Number

23

9. OGRID Number

000778

10. Pool name or Wildcat

Empire Abo

## SUNDY 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 G : 1980 feet from the N line and 1980 feet from the E lineSection 6 Township 18S Range 28E NMPM Eddy County

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

3671' GR

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

## NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON ☐☐ TEMPORARILY ABANDON ☐ CHANGE PLANS ☐PULL OR ALTER CASING ☐ MULTIPLE ☐

COMPLETION

OTHER: ☐

## SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐ PLUG AND ☐

ABANDONMENT

CASING TEST AND ☐

CEMENT JOB

OTHER: ☐

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: 6241' PBD: 6240' PERFS: 5940-6000'

MIRUPU. POH W/TBG.

REMOVE PKR &amp; LOWER SN

RU AND PERF 5840-5857, 5886-5928'.

ACIDIZE NEW PERFS

RTP

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

SIGNATURE Kellie D. Murrish TITLE Sr. Administrative Assistant DATE 08.06.03Type or print name Kellie D. Murrish E-mail address: murrkd@bp.com Telephone No. 505.394.1600

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APPROVED BY Jim W. Lewis TITLE District Supervisor DATE AUG 15 2003

Conditions of approval, if any: