

Submit 3 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
Minerals and Natural Resources



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

Form C-103
May 27, 2004

| | | |
|--|--|---|
| 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. 30-015-34839 |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> | | 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator B C 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 Rustler Bluff |
| 4. Well Location Unit Letter <u>L</u> : <u>1980'</u> feet from the <u>South</u> line and <u>1680'</u> feet from the <u>East</u> line Section <u>6</u> Township <u>25S</u> Range <u>28E</u> NMPM County <u>Eddy</u> | | 8. Well Number <u>1</u> |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2885' GR | | 9. OGRID Number 160825 |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> | | 10. Pool name or Wildcat Willow Lake (Delaware) |
| 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

NOTICE OF INTENTION TO:

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

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS.X P AND A ☐
CASING/CEMENT JOB X

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.

11/14/06 Spud 12 1/4" hole
11/15/06 Ran 16 jts of 8 5/8" 32#, LT&C, J-55 at 684'
Cmt w/ 350 sx of HLPP 12.8 ppg cmt to surface
Wait on cement 19 hrs
Test BOP and choke to 1500 psi, ok
Resume drilling.

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 Pam Botkin TITLE Engineering Tech DATE 3/28/07 **APR 03 2007**

Type or print name Pam Botkin E-mail address: pbotkin@usaonline.net Telephone No. 432-684-9696

For State Use Only

APPROVED BY: **RECORDS ONLY** TITLE

DATE **APR 03 2007**

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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

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| WELL API NO. 30-015-34839 |
| 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 Rustler Bluff |
| 8. Well Number 1 |
| 9. OGRID Number 160825 |
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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.)

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| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> |
| 2. Name of Operator B C Operating, Inc |
| 3. Address of Operator P. O. Box 50820 Midland, TX 79710 |

| |
|---|
| 4. Well Location Unit Letter L : 1980' feet from the South line and 1680' feet from the East line Section 6 Township 25S Range 28E NMPM County Eddy |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2885' GR |

| |
|--|
| 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

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| NOTICE OF INTENTION TO: 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"/> OTHER: <input type="checkbox"/> | SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS.X P AND A <input type="checkbox"/> CASING/CEMENT JOB X OTHER: <input type="checkbox"/> |
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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.

11/30/06 Reached TD at 5200' w/ 7 7/8" hole

12/3/06 Ran 124 jts 17#, J-55, LT&C production casing to 5200'
Cmt w/ 500 gal superflush 102, 525 sx Interfill C lead cmt w/ 0.125 lb/sx Poly E Flake LCM, 750
sx Super H tail cmt w/ 0.5% Halad 344, 0.4% CFR-3, 5 lb/sx Gibsonite, 3 lb/sx salt. Displaced w/
120 bbls FW, bumped plug at 1000 psi, float held, plug down at 1500. Wireline temp survey, cmt
top 2337'. Released rig at 2300 on 12/2/06. SI pending completion.

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 Pam Botkin TITLE Engineering Tech DATE 3/28 APR 03 2007

Type or print name Pam Botkin E-mail address: pbotkin@usaonline.net Telephone No. 432-684-9696
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Conditions of Approval (if any):