

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

RECEIVED

OCT 28 2003

WELL API NO. 30-015-01713
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE
State Oil & Gas Lease No.
Lease Name or Unit Agreement Name Empire Abo Unit "H"
Well No. 34
Pool name or Wildcat Abo

SUNDRY NOTICES AND REPORTS ON WELLS-ARTESIA (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.)	
Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
Name of Operator BP America Production Company	
Address of Operator PO Box 1089 Eunice, NM 88231	
Well Location Unit Letter N : 973 Feet From The North Line and 1650 Feet From The West Line Section 34 Township 17 S Range 28 E NMPM Eddy County	
Elevation (Show whether DF, RKB, RT, GR, etc.) 3672' Gr.	

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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 ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ANBANDONMENT ☒
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

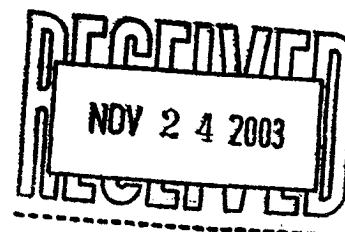
10/06/03 Set CIBP @ 6100'. Circ. well w/ 9.5# plugging mud. Spot 25 sks of cement @ 6100'-5739'. Pressure tested 4 1/2" casing to 300 psi- Held.

10/07/03 Spot 25 sks of cement @ 3887'. Tagged TOC @ 3537'. Perf @ 940' Set pkr @ 684' Sqz'd 35 sks of cement. Tagged @ 720'

10/08/03 Perf @ 720' Sqz'd 35 sks of cement. Tagged 390'. Perf @ 60' Circ. cement to surface w/ 20 sks of cement.

Cut off wellhead and anchors 3' BGL. Cap well. Installed dry hole marker. 9

Orig: CF
XC: EAU
JP
RM.111



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

SIGNATURE *[Signature]* TITLE *WELLS TEAM LEAD* DATE *10/28/03*

TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

APPROVED BY *[Signature]* TITLE *Field Rep ID* DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED NOV 20 2003