Submit 3 Copies To Appropriate District Office
District I

State of New Mexico Energy, Minerals and Natural Resources

Form C-103 Revised May 08, 2003

1625 N. French Dr., Hobbs, NM 87240 WELL API NO.		
District II OII CONSERVATION	1 DIVISION 30.015.22528	
1301 W. Grand Ave., Artesia, NM 88210 District III 1220 South St. Fra	ncis Dr. 5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 8	7505 STATE 😧 FEE 🗌	
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	6. State Oil & Gas Lease No. OG-103	
SUNDRY NOTICES AND REPORTS ON WEL		
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN (DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-10 PROPOSALS.)	R PLUG BACK TO A ROMPTRE ABO TINTE IK	
1. Type of Well: Oil Well		
2. Name of Operator NOV 1 0 2003 9. OGRID Number		
DD Amenica Devolution Company		
3. Address of Operator OCD-ARTESIA 10. Pool name or Wildcat		
P.O. Box 1089 Eunice NM 88231	EMPIRE ABO	
4. Well Location		
Unit Letter : 2300 feet from the S line and 1570 feet from the E line		
Section 6 Township 18S Range 28E NMPM County EDDY		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3653.1' GR		
12. Check Appropriate Box to Indicate	Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING MULTIPLE COMPLETION	CASING TEST AND CEMENT JOB	
OTHER:	OTHER: MIT	
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: 6350' PED: 6340' PERFS: 6272-6282' PKR: 6174' 10.23.03 Load & test casing to 560# psi. Held 30 mins. Casing test witnessed by Gerry Guy, NMOCD. Chart attached. This well is being evaluated by BP America Production Company for potential despening opportunities in a lower zone. The evaluation will be determined as a result of production outcomes of wells currently being drilled.		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
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Type or print name Kellie D. Murrish	DAIL	
APPROVED BY		
APPROVED BY DATE Conditions of approval, if any. APPROVED NOV 1 2 2003		

