Form C-103 State of New Mexico Submit 3 Copies To Appropriate District Office Energy, Minerals and Natural Resources Revised May 08, 2003 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30.015.22631 District II OIL CONSERVATION DIVISION 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III STATE X FEE 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 1220 S. St. Francis Dr., Santa Fe, NM 87505 B-2071-24 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A Empire Abo Unit "G" DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH 3 PROPOSALS.) 8. Well No. 1. Type of Well: Oil Well Gas Well Other 333 2. Name of Operator 9. OGRID Number RECEIVED BP America Production Company 000778 10. Pool name or Wildcat 3. Address of Operator P.O. Box 1089 Eunice NM 88231 Empire Abo 4. Well Location श्रामाहारो 2100 S Unit Letter _ 1100 feet from the line feet from the line and Section Township Range **NMPM** County 17S 28E Eddy 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3660.2' 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 ALTERING CASING REMEDIAL WORK TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS. 🔲 **PLUG AND ABANDONMENT** CASING TEST AND **PULL OR ALTER CASING MULTIPLE CEMENT JOB** COMPLETION \mathbf{x} 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' PBD: 6254' PKR: 6139' PERFS: 6234-6244 10.15.03: Load and test casing to 500# psi. Held 30 mins. Casing test witnessed by Gerry Guy, NMOCD. Chart attached. BP America Production Company has evaluated this wellbore and has determined that these is production potential in the Abo formation. Permission to retain TA status is therefore requested in order to complete our current workover program and develop another workover program which will require interest owner approval to provide funding. Temporary Abandonad Status eparaved I hereby certify that the information above is true and complete to the best of my knowledge and belief. Staff Support SIGNATURE. DATE _ Type or print name Kellie D. Murrish Telephone No. 505.394.1649 (This space for State use) APPROVED BY

Conditions of approval, if any:

DATE

VED OCT 2 8 2003