Form C-103 State of New Mexico Submit 3 Copies To Appropriate District Office Energy, Minerals and Natural Resources Revised May 08, 2003 District | WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30.015.22885 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 IX 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 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 PLUGRACK TO A Empire Abo Unit "L" DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH 30 PROPOSALS.) 8. Well No. 1. Type of Well: Gas Well Oil Well X Other 155 2. Name of Operator RECEIVED 9. OGRID Number 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 श्रिशकाहार 1040 2025 Unit Letter feet from the_ line feet from the line and **NMPM** County Section Township **18**S Range Eddy 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3552.7' 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 CHANGE PLANS** COMMENCE DRILLING OPNS. **PLUG AND ABANDONMENT** CASING TEST AND PULL OR ALTER CASING **MULTIPLE** COMPLETION CEMENT JOB 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: 6202' PBD: 6147' PERFS: 6064-6074' 10.16.03: Load and test casing to 580# psi. Held 30 mins. Casing test was not witnessed by a NMOCD representative. 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 K-parany Abandonad States approved provide funding. I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE. Staff Support DATE -

Type or print name Kellie D. Murrish

(This space for State use)

Conditions of approval, if any:

APPROVED BY

APPROVED OCT 2 8 2003

Telephone No. 505.394.1649

