Form 3160-5 (April 2004)

FEB -6 2009

. DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

FORM APPROVED
OMB NO. 1004-0137
Expires March 31, 2007

5 Lease Serial No.

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NMNM29276
6 If Indian, Allottee or Tribe Name

abandoned well. Use Forr				1111111111,71110			
SUBMIT IN TRIPLICATE -	7 If Unit or CA/Agreement, Name and/or No.						
I. Type of Well X Oil Well Gas Well Other Name of Operator BP America Production Company	8. Well Name and No SPARKPLUG RIDGE 2 17 FEDERAL COM						
3a. Address		3b. Phone No. (include a	rea code)	9 API Well No.	•		
P.O. Box 1089 Eunice NM 88231		575 - 394 - 1648	rea code)	30-015-32273 10 Field and Pool, or Exploratory Area			
4. Location of Well (Footage, Sec., T., R, M, or Survey I	Description)	373 334 1010		REDLAKE	oi, of Exploratory Area		
UL A, 660 FNL & 660 FEL SECTION 17, T18S, R27E				11. County or P	arish, State		
12. CHECK APPROPRIATE	BOX(ES) TO INC	ICATE NATURE OF	NOTICE, REPO				
TYPE OF SUBMISSION			PE OF ACTION				
Notice of Intent X Subsequent Report	Acidize Alter Casing	Deepen Fracture Treat	Reclamation		Water Shut-Off Well Integrity		
	Casing Repair	New Construction	Recomplete	_	Other		
Final Abandonment Notice	Change Plans	X Plug and Abandon	Temporarily	y Abandon	·		
	Convert to Injection	on Plug Back	Water Disp	osal _			
	rformed or provide the last fithe operation results in Notices shall be filed on ection.) 7/8' ' TBG. 2 7/8' ' TBG. SI SX CMT PLUG FRO 122 SX CMT PLUG BOP. FILL CSG W. CUT OFF ALL ANO 1, DRY HOLE MARKI	30nd No. on file with BLM a multiple completion or rely after all requirements, in ET @ 2960'. DISPLA DM 2960' TO 2710'. FROM 1198' TO SURFICHORS AND WELL HEASER, BACKFILL AND L	I/BIA Required streecompletion in a nicluding reclamation CE CSG POH LAYING FACE. POH ACE. D, WELD IN	APPRO	shall be filed within 30 days m 3160-4 shall be filed once pleted, and the operator has 2009		
14 I hereby certify that the foregoing is true and correct		Title			=		
Name (Printed/Typed) Barry C. Price		Area_0	perations Te	eam Lead			
Dany C. P.	•	Date 1/27/09					
THIS	SPACE FOR FED	ERAL OR STATE OF	FICE USE				
Approved by	-	Title		Date	,		
Conditions of approval, if any, are attached Approval of certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations the	those rights in the subj	arrant or Office ect lease					