



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

BILL RICHARDSON

Governor

Joanna Prukop
Cabinet Secretary

RECEIVED

JAN 12 2004

OCD-ARTESIA

Lori Wrotenbery

Director

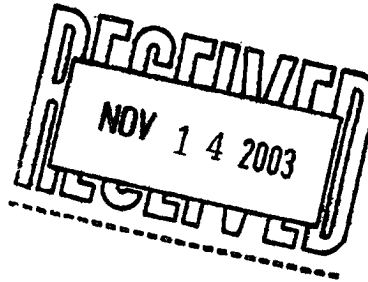
Oil Conservation Division

12 November 2003

BP America Production

P.O. Box 1089

Eunice, New Mexico 88231



E-374

Form C-103 Report of Plugging for your Empire Abo Unit 'E' # 374 ~~H-35-17-28~~ API 30-015-22775

Cannot be approved until an NMOC representative has made an inspection of the location and found it to be cleared to comply with OCD rules and regulations. Please check each item in the space provided to indicate that the work has been accomplished and the location is ready for final inspection.

- ☒ 1. All pits have been filled and leveled.
- ☒ 2. Rat hole and cellar have been filled and leveled.
- ☒ 3. A steel marker 4" in diameter and approximately 4' above mean ground level has been set in concrete to mark the exact location of the plugged well. (Marker must have operator name, lease name, well number and location including quarter/quarter section or unit letter, section, township, range and API well ID number permanently welded, stamped or otherwise engraved into the metal marker.)
- ☒ 4. The location has been leveled as nearly as possible to original top ground contour and has been cleared of all junk and equipment.
- ☒ 5. The dead men and tie downs have been cut and removed.
- ☐ 6. If a one well lease or last remaining well on lease, the battery and burn pit locations have been leveled and cleared of all junk & equipment.
- ☒ 7. All environmental concerns have been addressed as per OCD guidelines.

The above are minimum requirements and no plugging bond will be cancelled until all locations for plugged and abandoned wells have been inspected and Form C-103 approved.

When all of the work outlined above has been done, please notify this office by completing, signing and returning this letter to us so that our representative will not have to make more than one trip to the location.

I certify that the above work has been done and the above-mentioned lease is ready for OCD inspection and approval.

Kent Whitmire (Kdm)
Name
Operations Team Lead
Title
01.12.04

Van Barton
Van Barton
Field Rep. II

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

WELL API NO. 30-015-22775
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE
State Oil & Gas Lease No.
Lease Name or Unit Agreement Name Empire Abo Unit "E"
Well No. 374
Pool name or Wildcat Abo

SUNDRY NOTICES AND REPORTS ON WELLS
(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 ☒ GAS WELL OTHER

Name of Operator
BP America Production Company

Address of Operator
PO Box 1089 Eunice, NM 88231

Well Location
Unit Letter H 220 Feet From The North Line and 700 Feet From The West Line
Section 35 Township 17 S Range 28E NMPM Eddy County

Elevation (Show whether DF, RKB, RT, GR, etc.)
3692' 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.

TD 6345' PBDT 6294' Csg. 5 1/2" Perfs 6192'-6201' CIBP set @ 6175' TOC @ surface

10/20/03 Tagged existing CIBP @ 6175'. Circ. well w/ plugging mud. Pressure tested casing to 300 psi. Spot 25 sks of cement @ 6175'-5929'.

10/21/03 Spot 25 sks of cement @ 3960'. Tagged @ 3717'. Spot 30 sks of cement @ 855'. Tagged @ 569'

10/22/03 Spot 10 sk surface plug 60'-surface.

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

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

SIGNATURE

Jim Pierce

TITLE

WELLS TEAM LEAD

DATE

11/10/2003

TYPE OR PRINT NAME

JIM PIERCE

TELEPHONE NO.

(505) 677-3677

(This space for State Use)

APPROVED BY

TITLE

DATE

JAN 26 2004

CONDITIONS OF APPROVAL, IF ANY: