Form 3160-5 (September 2001)

New Mexico Oil Conservation Division, District I

UNITED STATES 1625 N. Freuch Drive

DEPARTMENT OF THE INTERIGEOBDS, NM 83249

BUREAU OF LAND MANAGEMENT

5. Lease S

FORM APPROVED OMB No. 1004-0135 Expires: January 31, 2004

Į	J. Dease Serial No.
	NMNM078148
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SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.							NMNM078148 6. If Indian, Allottee or Tribe Name			
SUBMIT IN TR	9	7. If Unit or CA/Agreement, Name and/or No.								
1. Type of Well						1				
Oil Well Gas Well		8. Well Name and No.								
2. Name of Operator		French, 9004 JV-P #2								
BTA Oil Producers 3a. Address	1 707 3 7 6			1	9. API Well No.					
		Phone No. (include area code)			30-025-31118					
104 S. Pecos, Midland, TX 7 4. Location of Well (Footage, Sec.,	(432) 682-3753			10. Field and Pool, or Exploratory Area Corbin, Wolfcamp South						
UL -I-, Sec. 24, T18S, R32E 1980' FSL & 510' FEL				11. County	County or Parish, State Lea Co., NM					
12. CHECK API	PROPRIATE BOX(ES) TO	O IN	DICATE NAT	URE O	F NOTICE. R					
TYPE OF SUBMISSION			TYPE OF ACTION							
	Acidize		Deepen	П	Production (Star	/Resume)		Water Shut-Off		
Notice of Intent	Alter Casing	ō	Fracture Treat	ā	Reclamation	resume)	=	Well Integrity		
Subsequent Report	Casing Repair		New Construction		Recomplete		_	Other		
	Change Plans		Plug and Abando	n 🗖	Temporarily Ab	andon				
Final Abandonment Notice	Convert to Injection		Plug Back		Water Disposed	2122				
3. Describe Proposed or Completed If the proposal is to deepen direct Attach the Bond under which the following completion of the inventesting has been completed. Find determined that the site is ready to BTA Oil Producers advises the performed in accordance with	at we intend to set a CIPB and the Conditions of Approval se	i con	duct a mechanica	al integri	ty test in this we	Il the week dassociated	0C	8/2004 This will l	be 9/04.	
 14. 1 hereby certify that the foregoing Name (PrintedlTyped) 	g is true and correct						·			
Pam Inskeep	\wedge		Title	Regula	atory Administra	itor				
Signature Hom	Mokaen		Date	10/07/	2004					
	THIS SPACE F	OR	FEDERAL OR	STATE	OFFICE USE					
Approved by (Signature)				Name (Printed/Ty	ped)		Title			
Conditions of approval, if any, are a certify that the applicant holds lega which would entitle the applicant to co	attached. Approval of this notice l or equitable title to those righ onduct operations thereon.	e doe	s not warrant or the subject lease	Office				Date		
Title 18 U.S.C. Section 1001 and Title				n knowin	ngly and willfully	to make to an	v denari	ment or agency of the	e I Inited	

s any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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