

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

HOBBS OGD
 FEB 06 2014
 RECEIVED

WELL API NO. 30-025-07281
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Peoples security
8. Well Number 1
9. OGRID Number 025670
10. Pool name or Wildcat Gabriett San Andres
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
BCSD Operating, Inc.

3. Address of Operator
P.O. Box 302, Hobbs, NM 88241

4. Well Location
 Unit Letter **L** : **1980** feet from the **5** line and **660** feet from the **W** line
 Section **23** Township **16S** Range **38E** NMPM **LEA** County **NM**

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: Returns to Production <input checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Please Attachment.

Spud Date:

Rig Release Date:

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

SIGNATURE **Sonnie Hill** TITLE **President** DATE **2/6/2014**

Type or print name **Sonnie Hill** E-mail address: **dhille@WELLCONSERVATION.COM** PHONE: **575.390.7620**

APPROVED BY: _____ DATE _____

Conditions of Approval (if any):

Accepted for Record Only
MJB 2/7/2014

FEB 10 2014

**BC & D Operating, Inc.
P.O. Box 302
Hobbs, New Mexico 88241**

**Peoples Security # 1
Sec. 23, T16S, R38E
API No. 30-025-07281**

BC & D Operating will return the subject well to production immediately.

The well was previously producing until someone cut and removed the copper wiring supplying electricity to the electric motor on the pumping unit.

BC & D will replace the wiring and any other items needed to place the well back on active status.

A subsequent C-103 will be submitted as soon as the work is completed.