

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

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

WELL API NO. 30-025-29929
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-1709
7. Lease Name or Unit Agreement Name Buckeye -C-, 8601 JV-P
8. Well Number 2
9. OGRID Number 003002
10. Pool name or Wildcat Vacuum Grayburg, San Andres

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator BTA Oil Producers	
3. Address of Operator 104 S. Pecos, Midland, TX 79701	
4. Well Location Unit Letter <u>D</u> : <u>990</u> feet from the <u>north</u> line and <u>330</u> feet from the <u>west</u> line Section <u>36</u> Township <u>17S</u> Range <u>35E</u> NMPM Lea County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3900' GR 3914' RKB</u>	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: Partial Plug/Pump Test San Andres Zone <input checked="" type="checkbox"/>
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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.

1/16/2006 MI & RU P&A rig. RU wireline truck. Dumped 5 sx cmt (35') on CIBP @ 9050'. Ran tbg to 9000'.

1/17/2006 Displaced hole w/9.2 ppg fluid. Rec a good show of oil. Set CIBP @ 7500' w/5 sx cmt (35') on top. Set CIBP @ 6500' w/5 sx cmt (35') on top. Ran tbg to 5000'. RD P&A rig.

1/26/2006 MI & RU well service unit. TOH w/tbg.

1/27/2006 TIH w/tbg, pump & rods.

1/29/2006 Pumped 99 B/W - no oil, slight gas blow. Continue testing (San Andres) perfs 4806-53'.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Pam Inskeep TITLE Regulatory Administrator DATE 02/02/2006

Type or print name Pam Inskeep

E-mail address: pinskeep@btaoil.com Telephone No. (432) 682-3753

For State Use Only

APPROVED BY: Hayden W. Wink

TITLE FIELD REPRESENTATIVE II/STAFF MANAGER DATE FEB 07 2006

Conditions of Approval (if any):