Continued on next page)

## UNITED STATES DEPARTMENT OF THE INTERIOROCD-HOBBS BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

5. Lease Serial No.

FURM APPROVED Z3Z4
OMB No. 1004-0135
Expires: January 31, 2004
Expires. Suitairy 51, 2004

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				6. If Indian,	Allottee or Tribe Name
SUBMIT IN TRIPLICATE - Other instructions on reverse side				7. If Unit or	CA/Agreement, Name and/or No.
1. Type of Well  Oil Well  Gas Well  Other  Diame of Operator  BTA Oil Producers				8. Well Name and No. Grama Ridge Fed #2	
3a. Address 3b. Phone No. (include area code)				9. API Well No.	
104 S. Pecos, Midland, TX 79701 432-682-3 4. Location of Well (Footage, Sec., T, R., M., or Survey Description) Sec. 9, T22S-R34E NWNW 1046' FNL & 1273' FWL			de area code)	30-025-30884-00-S1 10. Field and Pool, or Exploratory Area Grama Ridge 11. County or Parish, State	
				Lea County, NM	
12. CHECK AP	PROPRIATE BOX(ES) TO	INDICATE NATU	TRE OF NOTICE,	REPORT, OR	OTHER DATA
TYPE OF SUBMISSION		T	YPE OF ACTION		, , , , , , , , , , , , , , , , , , , ,
Attach the Bond under which the	the work will be performed or provolved operations. If the operation is all Abandonment Notices shall be for final inspection.)  It is follows:  It log and gauge ring. Run and 12660')  ssembly.  T. Perform "Casing Integrity To tubing.	y, give subsurface locan ide the Bond No. on file results in a multiple con filed only after all requ set CIBP for 2-3/8" 4	ons and measured and to e with BLM/BIA. Requipletion or recompletion irements, including reclarations and the second seco	any proposed we ue vertical depth ired subsequent rain a new interval amation, have been charted to the control of the control	Water Shut-Off Well Integrity Other  Ork and approximate duration thereo so of all pertinent markers and zones. Peports shall be filed within 30 days 1, a Form 3160-4 shall be filed once een completed, and the operator has
14. I hereby certify that the foregoin Name (Printed!Typed)	g is true and correct	ı .			
Part V. I.			Regulatory Adminis	brator.	
Signature HM	mskeer	Date	02/16/2006	trator	
	THIS SPACE FO	OR FEDERAL OR S		E	
Approved by (Signature)		1	Name Printed/Typed)		Title
Conditions of approval, if any, are certify that the applicant holds legs which would entitle the applicant to contain the container.	attached. Approval of this notice all or equitable title to those rights conduct operations thereon.	door not warrant or	Office		Date
Title 18 U.S.C. Section 1001 and Tit States any false, fictitious or fraudule	tle 43 U.S.C. Section 1212, make in statements or representations as	it a crime for any person to any matter within its	knowingly and willfull jurisdiction.	y to make to any	department or agency of the United