Submit 1 Copy To Appropriate District Office State of New Mexico	Form C-103
Submit 1 Copy To Appropriate District Office District I – (575) 393-6161 1625 N. French Dr., Hobbs 1 District II – (575) 748-1283	Revised July 18, 2013
1625 N. French Dr., Hobbs N. 18240 District II – (575) 748-1283	WELL API NO. 30-025-39734
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 District III – (505) District I	5. Indicate Type of Lease
1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410	STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Ferrice ECEIVED Santa Fe, NM 87505 87505 SUNDRY NOTICES AND REPORTS ON WELLS	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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.)	SOUTH DENTON 6 STATE
1. Type of Well: Oil Well Gas Well X Other SWD	8. Well Number 2
2. Name of Operator BC OPERATING, INC.	9. OGRID Number 160825
3. Address of Operator P.O. BOX 50820	10. Pool name or Wildcat SAN ANDRES & GLORIETA
MIDLAND, TX 79705 4. Well Location	SAN ANDRES & GLORIETA
Unit Letter D : 330 feet from the NORTH line and	330 feet from the WEST line
Section 6 Township 16S Range 38E	NMPM LEA County
11. Elevation (Show whether DR, RKB, RT, GR, etc. 3,750' GR	
	· · · · · · · · · · · · · · · · · · ·
12. Check Appropriate Box to Indicate Nature of Notice	Report or Other Data
NOTICE OF INTENTION TO:	SSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR	
	RILLING OPNS. P AND A
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN	IT JOB
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM	
OTHER: OTHER:	
 Describe proposed or completed operations. (Clearly state all pertinent details, ar of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Co. 	
proposed completion or recompletion.	
4/28/2016:	WAS CALLED TOWNO
RAN MIT FOR 30 MINS. 540 PSI STARTING AND 540 PSI ENDING. MA	
	TO RUN TEST.
	•
Spud Date: Rig Release Date:	
	The last state of the last sta
I hereby certify that the information above is true and complete to the best of my knowled	ge and belief.
SIGNATURE TITLE REGULATORY ANAL	YSTDATE_5/9/2061
Type or print name SARAH PRESLEY E-mail address: SPRESLEY@BCC	DPERATING.COM PHONE: 432-684-9696
For State Use Only	1 /
VII Alwards Dist Sa	X/20/2011
Conditions of Approval (if any)	DATE of COLORS

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