

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

HOBBS OCD
 DEC 30 2016
 RECEIVED

State of New Mexico
 Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised July 18, 2013

<p style="text-align: center;">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.)</p> <p>1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/></p> <p>2. Name of Operator BTA Oil Producers, LLC</p> <p>3. Address of Operator 104 South Pecos, Midland, TX 79701</p> <p>4. Well Location Unit Letter <u>M</u> : <u>330</u> feet from the <u>South</u> line and <u>380</u> feet from the <u>West</u> line Section <u>16</u> Township <u>22S</u> Range <u>34E</u> NMPM Lea County</p> <p>11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3476' GR</p>	<p>WELL API NO. 30-025-43426</p> <p>5. Indicate Type of Lease X STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED</p> <p>6. State Oil & Gas Lease No. ---</p> <p>7. Lease Name or Unit Agreement Name Gramma Fed Com, 8817 JV-P</p> <p>8. Well Number 2H</p> <p>9. OGRID Number 260297</p> <p>10. Pool name or Wildcat Gramma Ridge; Bone Springs, West</p>
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12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<p style="text-align: center;">NOTICE OF INTENTION TO:</p> <p> 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"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/> </p>	<p style="text-align: center;">SUBSEQUENT REPORT OF:</p> <p> 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 checked="" type="checkbox"/> OTHER: <input type="checkbox"/> </p>
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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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 09/25/16 Spud well.
- 09/28/16 TD 17 1/2" hole @ 1754'. Set 13 3/8" 54.5# J-55 csg @ 1754'. Cmt w/11475 sx Class C. Circ to surface. WOC 18 hrs. Test csg to 1500# for 30 mins.
- 10/01/16 TD 12 1/4" hole @ 5205'. Set 9 5/8" 40# N-80 & N-80 csg @ 5205'. Cmt w/1135 sx Class C. Circ to surface. WOC 18 hrs. Test csg to 1500# for 30 mins.
- 10/17/16 TD 8 3/4" hole @ 20129'. Set 5 1/2" 120# P-110 TXP-BTC csg @ 20129'. Cmt w/3140 sx Class H. TOC 3465' tag.
- 10/18/16 Test 5-1/2" csg to 8500#. Rig released.

Spud Date: 09/25/16 Rig Release Date: 10/18/16

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

SIGNATURE *Pam Inskeep* TITLE: Regulatory Administrator DATE: 12/30/2016

Type or print name: Pam Inskeep E-mail address: pinskeep@btaoil.com PHONE: 432-682-3753

For State Use Only

APPROVED BY: *[Signature]* TITLE: Petroleum Engineer DATE: 12/30/16

Conditions of Approval (if any): _____