Submit 3 Copies To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources		35829	Form C-103 June 19, 2008
1625 N French Dr. Hohbs NM 88240			WELL 30-025-25/02API N	
District II 1301 W Grand Ave., Artesia, NMRECE METONSERVATION DIVISION 1220 South St. Francis Dr.			5. Indicate Type of Lease	
District III 1000 Rio Brazos Rd, Aztec, NM 87410 26 2009 Santa Fe, NM 87505			STATE STATE FEE 6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM			L-6315	(0.
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			7. Lease Name or Unit Agreement Name LEA, 7406 JV-S	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			8. Well Number 004	
2. Name of Operator			9. OGRID Number 003019 /	
BTA OIL PRODUCERS 3. Address of Operator			10. Pool name or Wildcat	
1045 SOUTH PECOS MIDLAND, TX 79701			W. SCARBOROUGH -YA	TES
4. Well Location	(50 fact from the SOUTH	line and 2310	feet from the WI	FST line /
	650_feet from theSOUTH_ ship 26S Range 36E N	line and2310 NMPM LEA	County	
	11. Elevation (Show whether DR,			
12. Check A	ppropriate Box to Indicate N	ature of Notice, R	eport or Other Data	
			EQUENT REPORT	
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☒ REMEDIAL WOFT TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DR			_	NG CASING ☐ A ☐
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN			JOB 🗆	
DOWNHOLE COMMINGLE				
OTHER:	eted operations. (Clearly state all p	OTHER:	give pertinent dates, includ	ling estimated date
of starting any proposed wo or recompletion.	rk). SEE RULE 1103. For Multip	le Completions: Atta	ch wellbore diagram of pro	oposed completion
1) MIRU-PLUGGING EQUIP	MENT AND STEEL PITS		25	
2) ND WELLHEAD-NU BOP-SET CIBP @ 3095'-CIRC PLUGGING MUD-SPOT 25 SXS ON TOP CIBP				
3) SPOT 25 SXS @ 21782 PERF AND SQE 30 SX & 2100. WOLL 1746 4) PERF AND SPOT 30 SXS @ 1350, 1450 WOL 5 TAG				
5) PERF AND STOT 20 SXS @ 60' AND CIRCULATE TO SURFACE				
6) CUT OFF WELLHEAD, CO	JI OFF ANCHORS, COVER CEL	DLAK, CLEAN LOC	A HON, AND MOVE OF	•
85/8@1400'				
51/2@3268	24 h	Oıl Conservation Dıvı ours prior to the bed	sion Must be notified Jinning of plugging operati	ons !
T. SALT 2178'	B. SALT 3012			
•		* Pert A	IND SOZ 30SX	WOL \$ TAG
				WOL 7 / NO
Spud Date:	Rig Release Da	ate:		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE Maty Head	TITLE K	resident	DATE_	8-24-09
Type or print name Monty L	Seckham E-mail address	s:	PHONE: &	575-390-207
For State Use Only	ALL	h a 0		1.1-
APPROVED BY: Washington APPROVED BY: Conditions of Approval (if any):	Wtahin TITLE CON	pliance Otti	COV DATE O	1101/2009