Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103
Office District I	Energy, Minerals and Natural Resources	June 19, 2008
1625 N French Dr , Hobbs, NM 88240	CONSERVATION DIVISION	WELL API NO
District II	ONSERVATION DIVISION	30-025-25909 <b>V</b>
1301 W Grand Ave, Artesia, NM 88210	- 1220 South St. Francis Dr	5. Indicate Type of Lease
1000 Rio Brazos Rd , Aztec, NM 874SEP 2	9 2009 1220 South St. Francis Dr. Santa Fe, NM 87505	STATE FEE
District IV	Santa Fe, NM 8/303	6. State Oil & Gas Lease No
1220 S St Francis Dr, Santa Fe, HOBB		L-6315
8/505	S AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
SUNDAY NOTICE	S TO DRILL OR TO DEEPEN OR PLUG BACK TO A	LEA, 7406 JV-S
DIFFERENT RESERVOIR USE "APPLICAT	TON FOR PERMIT" (FORM C-101) FOR SUCH	,
PROPOSALS)		8. Well Number 006
1. Type of Well: Oil Well Gas Well Other		
2. Name of Operator		9. OGRID Number 003019
BTA OIL PRODUCERS		
3. Address of Operator		10. Pool name or Wildcat
1045 SOUTH PECOS MIDLAND, 7	ΓX 79701	COMANCHE STATELINE -YATES - 712
4. Well Location		
Unit LetterF _:2310_feet from theNORTH line and1650feet from theWESTline		
1	1. Elevation (Snow whether DR, RRB, RT, GR, etc.	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING		
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A		
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB		
DOWNHOLE COMMINGLE		
OTHER: OTHER.		
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.		
9/9/09 CIBP @ 3116' - CIRCULATE PLUGGING MUD - SPOT 25 SACKS @ 3116'		
9/10/09 PERF @ 1950' – PUMP 35 SACKS – TAG @ 1760' – PERF @ 1450' – PUMP 40 SACKS		
9/11/09 TAG @ 1241' – PERF @ 550' – PUMP 40 SACKS – TAG @ 437' – PERF @ 60' – CIRCULATE 17 SACKS TO SURFACE –		
INSTALL PA MARKER – CLEAN UP LOCATION  Approved for plugging of well bore only.		
Liability under bond is retained pending receipt		
of C-103 (Subsequent Report of Well Plugging)		
which may be found at OCD Web Page under Forms, www.cmnrd.state.nm.us/ocd.		
		and arotate minus/oca.
Smud Data:	Rig Release Date:	
Spud Date	Rig Release Date.	
I hereby certify that the information above is true and complete to the best of my knowledge and belief		
I hereby certify that the information about	ove is true and complete to the best of my knowled	ige and belief
SIGNATURE M. T. BOLLING TITLE DUING DATE 9-25-09		
SIGNATURE // July Belance IIILE Provide DATE 2-23		
Thurs or mint forms	E-mail address:	. A. PHONE:
Type or print name	, E-man address.	, ,,= ITIONE.
For State Use Only		
APPROVED BY: OF THE DISTRICT 1 SUPERVISOR DATE SEP 3 U 2009		
APPROVED BY Conditions of Approval (if any)		
Conditions of Approval (if any):		
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