

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103

June 19, 2008

RECEIVED

OCT 02 2009

HOBBSD

CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-025-11645

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

South Langlie Jal Unit

8. Well Number 26

9. OGRID Number

160285

10. Pool name or Wildcat

Jalmat Tansill Yates Seven Rivers

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.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☒

2. Name of Operator

B C Operating, Inc

3. Address of Operator

P O Box 50820 Midland, TX 79710

4. Well Location

Unit Letter M : 330' feet from the South line and 330' feet from the West lineSection 17 Township 25S Range 37E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

3092' KB

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐ CHANGE PLANS ☐PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐DOWNHOLE COMMINGLE ☐OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐ P AND A ☐CASING/CEMENT JOB ☐OTHER TA Status ☒

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.

We request Temporarily Abandon status for this well. Sylvia Dickey – OCD Field Rep witnessed test 7/15/09. Pressured casing to 555 psi, dropped to 550 psi in 30 mins. Chart is attached.

This Approval of Temporary
Abandonment Expires 10/05/11

SECOND TA APPROVAL

Spud Date:

Rig Release Date:

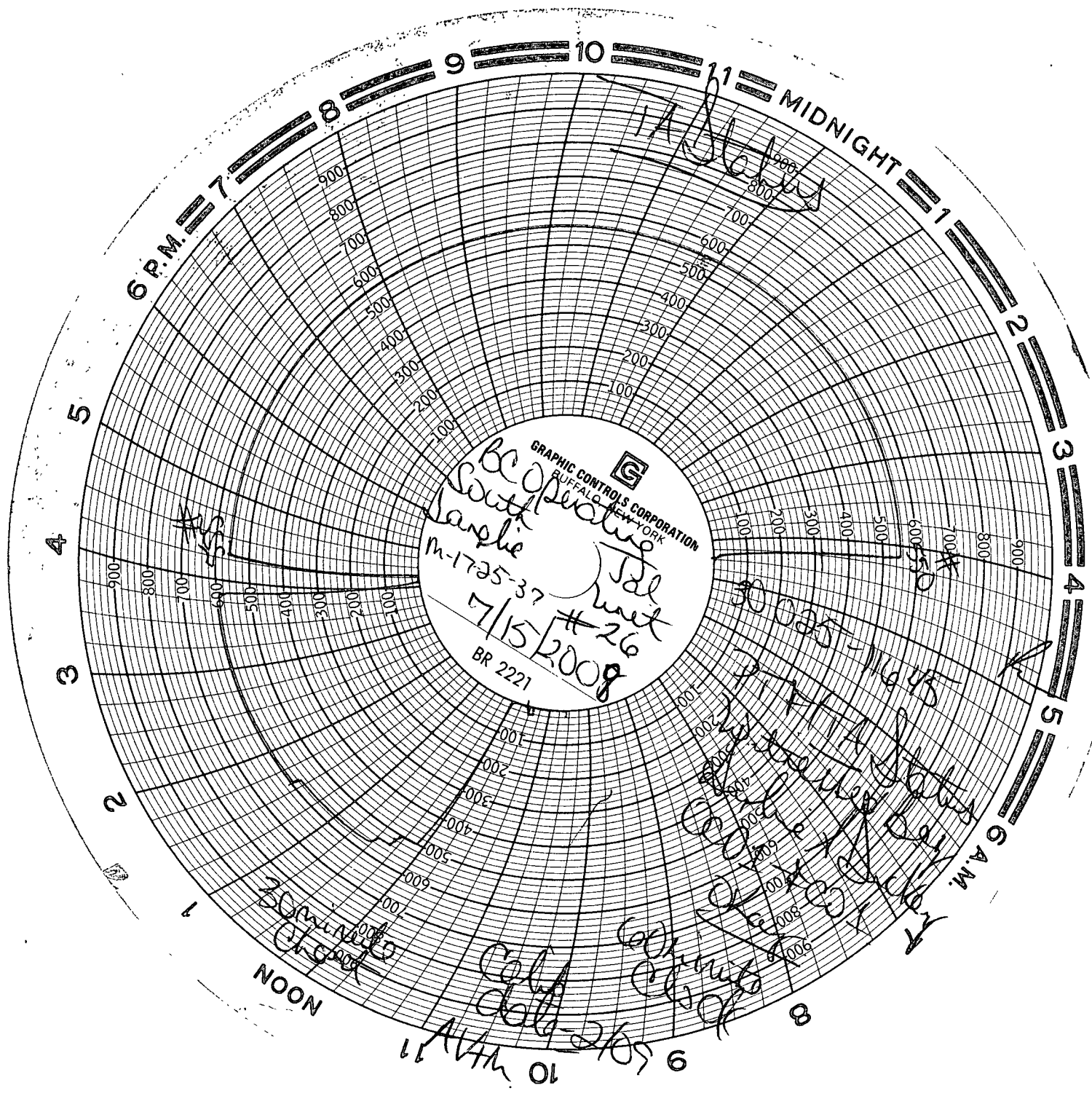
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Tami Parker TITLE Regulatory Analyst DATE 9/30/09Type or print name Tami Parker E-mail address: tparker@blackoakres.com PHONE: (432) 684-9696

For State Use Only

APPROVED BY: [Signature] TITLE PETROLEUM ENGINEER DATE OCT 05 2009

Conditions of Approval (if any):



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

BC 0000
South
Sample
M-1735-37
7/15/2008
BR 2221
Sal
wet
#26

1A 8645

30 025-11645
PT 11A

Clouds
Clear
NOON

6 A.M.

11 A.M.
10
9
8
7
6
5
4
3
2
1

NOON

Alfred
July