Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103
Office	Energy, Minerals and Natural Resources	June 19, 2008
District I  1625 N French Dr , Hobbs, NM & C		WELL API NO.
	OIL CONSERVATION DIVISION	30-025-25930 <b>V</b>
1301 W Grand Ave , Artesia, NM 88210 District III MAK 0 3	2010 1220 South St. Francis Dr.	5. Indicate Type of Lease STATE S FEE STATE
1000 Rio Brazos Rd, Aztec, NM 87410	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1000 Rio Brazos Rd, Aztec, NM 87410 <u>District IV</u> 1220 S St Francis Dr, Santa Fe, NM 87505	OCD Sailta T C, TVW 07505	L-6315
87505		
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		LEA, 7406 JV-S
PROPOSALS)		8. Well Number 008
1. Type of Well: Oil Well Gas Well Other		
2. Name of Operator /		9. OGRID Number 003019
BTA OIL PRODUCERS /		10. Pool name or Wildcat
3. Address of Operator		COMANCHE STATELINE -YATES
1045 SOUTH PECOS MIDLAND, T	X 79701	COMANCIL STATEBINE TATES
4. Well Location		
Unit Letter C : 901_feet from theNORTH line and1650feet from theWESTline/		
Section 28 Township 26S Range 36E NMPM LEA County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
Carlotte Control of the Control of t		
12. Check App	propriate Box to Indicate Nature of Notice,	Report or Other Data
L DEPORT OF		
NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:  REMEDIAL WORK AND ARANDON COME REMEDIAL WORK ALTERING CASING		
PERFORM REMEDIAL WORK   PLOG AND ABANDON		
1 OLL OIT ALIEN OF TOTAL	MULTIPLE COMPL   CASING/CEMEN	1 306
DOWNHOLE COMMINGLE		
OTHER	□ OTHER.	
OTHER.	ed operations. (Clearly state all pertinent details, an	d give pertinent dates, including estimated date
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		
au recompletion		
214C CIRCLE ATE DELICCING MUD - SPOT 25 SACKS @ 3146' - PERF @ 1500' - PUMP 40 SACKS		
9/16/09 TAG @ 1265' - PERF @ 550' - PUMP 40 SACKS - TAG @ 400' - PERF @ 60' - CIRCULATE 20 SACKS TO 30KI ACE		
INSTALL PA MARKER CLEAN UP LOCATION		
	Approved for plu	igging of well bore only.
Liability under bond is retained pending receipt		
	which may be for	nuent Report of Well Plugging) and at OCD Web Page under
	Forms, www.emn	rd.state.nm.us/ved.
		A Company of the state of the s
Spud Date:	Rig Release Date:	
I hereby certify that the information ab	ove is true and complete to the best of my knowledg	ge and belief.
	<b>a</b>	
MAK.	TITLE President	DATE 3-1-20/U
SIGNATURE //Lay Dubl	IIILE //2S/0/60)	DATE O
Type or print name Mrnty Beckham E-mail address:		PHONE: <u>575-390-207</u>
Type of print name /11/14 DECEMBERS		
For State Use Only		
APPROVED BY:	TITLE TITLE	DATE 3-8-10
Conditions of Approval (if any):		