State of New Mexico Form C-103 Submit 3 Copies Ener Minerals and Natural Resources Department to Appropriate Revised 1-1-89 District Office OIL CONSERVATION DIVISION **DISTRICT I** WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-025-22979 **DISTRICT II** Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE FEE 📙 DISTRICT III
1000 Rio Brazos Rd., Aziec, NM 87410 6. State Oil & Gas Lease No. OG 5337 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) LCH 689 LTD 1. Type of Well: MET X GAS WELL OTHER 2. Name of Operator 8. Well No. BTA Oil Producers Address of Operator 9. Pool name or Wildcat 104 South Pecos, Midland, TX 79701 North Bagley, Permo Penn 4. Well Location $\underline{}:\underline{1980}$ Feet From The $\underline{}$ N Line and 1980 Feet From The Unit Letter __ Line Township / 1/1-S 33-E **NMPM** Section Range County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4216 KB Check Appropriate Box to Indicate Nature of Notice, Report or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: X PLUG AND ABANDON ALTERING CASING PERFORM REMEDIAL WORK REMEDIAL WORK **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. * PLUG AND ABANDONMENT **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB OTHER: OTHER: 12. 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. Proposed P&A Procedure Set CIBP @ 10200' w/35' cmt on top Spot 25 sx @ 8500' (T. Wolfcamp) Cut & Pull 5-1/2" csg (T. cmt @ 7800') Spot 50 sx @ 5-1/2 stub Spot 50 sx @ 5150 (Glorietta) Spot 75 sx @ 3775' (8-5/8" shoe) Cut & Pull 8-5/8" Csg Spot 75 sx @ 50' Below 8-5/8" stub Spot 75 sx @ 435' (13-3/8" shoe) Spot 10 sx @ Surface, Install Dry Hole Marker complete to the best of my knowledge and belief. I hereby certify that the

SIGNATURE COMPLETE TITLE Operations Manager DATE 2-11-97

TYPEOR PRINT NAME ROYCE BOYCE 915/682-3753

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