

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

<p align="center"><b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)</p>		<p>5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/></p> <p>5. State Oil &amp; Gas Lease No.</p>
<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/></p> <p>2. Name of Operator <b>BTA OIL PRODUCERS</b></p> <p>3. Address of Operator <b>104 South Pecos Midland, Texas 79701</b></p> <p>4. Location of Well UNIT LETTER <b>"O"</b>, <b>660</b> FEET FROM THE <b>South</b> LINE AND <b>1980</b> FEET FROM THE <b>East</b> LINE, SECTION <b>6</b> TOWNSHIP <b>12-S</b> RANGE <b>33-E</b> NMPM.</p> <p>15. Elevation (Show whether DF, RT, GR, etc.) <b>4293' GL</b></p>		<p>7. Unit Agreement Name</p> <p>8. Farm or Lease Name <b>Hugh 689-C</b></p> <p>9. Well No. <b>4</b></p> <p>10. Field and Pool, or Wildcat <b>Bagley, N. (Penn)</b></p> <p>12. County <b>Lea</b></p>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
<p>PERFORM REMEDIAL WORK <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p>	<p>PLUG AND ABANDON <input type="checkbox"/></p> <p>CHANGE PLANS <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p>
<p>REMEDIAL WORK <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p>	<p>ALTERING CASING <input type="checkbox"/></p> <p>PLUG AND ABANDONMENT <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p>

17. 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.

4/21/75 Cmt'd 5 1/2" 17 & 23# K-55 ST&C &N-80 LTC csg. @ 10,450' w/800 sx cmt. PD @ 1:45 A.M.

4/22/75 WOC 18 hrs Tested to 1500# for 30 min. Held O.K.

4/23/75 MORT

4/24/75 Prep. to complete

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

SIGNED Bob Newland Bob Newland TITLE Regulatory Supervisor DATE 4/23/75

APPROVED BY Joe D. [Signature] TITLE \_\_\_\_\_ DATE APR 24 1975

CONDITIONS OF APPROVAL, IF ANY: