

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.

30-025-31060

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

L-332

7. Lease Name or Unit Agreement Name

Sunray -A- 6822 Ltd

8. Well No.

2

9. Pool name or Wildcat

Lane (San Andres)

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

BTA Oil Producers

3. Address of Operator

104 S. Pecos, Midland, Tx 79701

4. Well Location

Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West Line

Section 36 Township 9S Range 33E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

4272' GR 4285' RKB

11. 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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☒

OTHER: Rig Release ☒

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.

12-29-90

TD 4756', Cmtd 5-1/2" 14# J-55 STC csg @ 4756' w/800 sx, WOC,  
TOC @ 950', Nipple down BOP's, Released Rig 2:00 p.m., WOC,  
MORT

Prep to complete.

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

SIGNATURE

*Dorothy Houghton*

TITLE

Regulatory Administrator

DATE

1-2-91

TYPE OR PRINT NAME

Dorothy Houghton

TELEPHONE NO. 915-682-3753

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: