

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-4039

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Option 694 Ltd.

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Undesignated - Penn

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 35, T-8-S, R-35-E

12. COUNTY OR PARISH

Roosevelt

13. STATE

New Mexico

1. OIL WELL ☐ GAS WELL ☒ OTHER **Dry Hole**

2. NAME OF OPERATOR

BTA Oil Producers

3. ADDRESS OF OPERATOR

104 South Pecos, Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1980' FWL, 2130' FWL, Sec. 35, T-8-S, R-35-E,
Roosevelt County, New Mexico

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4169 KB

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Final Plugging Procedure:

Run & pulled 8-5/8" casing 1130'

Set 35 sx plug @ 1130' (8-5/8" stub)

Set 45 sx @ 370' (12-3/4" shoe)

Set 10 sx @ surface.

Installed dry hole marker per NMOC regulations.

18. I hereby certify that the foregoing is true and correct

SIGNED

L. H. Boyer

TITLE

Production Clerk

DATE

4/19/71

(This space for Federal or State office use)

APPROVED BY

TITLE

APPROVED

DATE

CONDITIONS OF APPROVAL, IF ANY:

JAN 5 1972

*See Instructions on Reverse Side

ACTING DISTRICT ENGINEER

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by or may be obtained from, the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include special information as required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones or other zones with present significant fluid contents; not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between, and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conducted for final inspection looking to approval of the abandonment.

U.S. GOVERNMENT PRINTING OFFICE: 1965 O-685229

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS

1. NAME OF OPERATOR _____

2. ADDRESS OF OPERATOR _____

3. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 11 below.)
A. Section _____ B. Range _____ C. Township _____

4. TITLE OF OPERATION (Show well on map and label)

5. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

1. PROPOSAL TO ABANDON WELL	2. REPORT OF ABANDONMENT
3. PROPOSAL TO REPAIR WELL	4. REPORT OF REPAIR
5. PROPOSAL TO PLUG WELL	6. REPORT OF PLUG
7. PROPOSAL TO TEST WELL	8. REPORT OF TEST
9. PROPOSAL TO OPERATE WELL	10. REPORT OF OPERATION

11. LOCATION OF WELL (See also space 3 above.)
A. Section _____ B. Range _____ C. Township _____

12. TITLE OF OPERATION (Show well on map and label)

13. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

1. PROPOSAL TO ABANDON WELL	2. REPORT OF ABANDONMENT
3. PROPOSAL TO REPAIR WELL	4. REPORT OF REPAIR
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7. PROPOSAL TO TEST WELL	8. REPORT OF TEST
9. PROPOSAL TO OPERATE WELL	10. REPORT OF OPERATION

14. I hereby certify that the foregoing is true and correct.

SIGNED _____

(This space for Federal or State office use)

APPROVED BY _____

CONDITIONS OF APPROVAL: _____