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NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
K-2658	

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 - A" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Dry Hole		7. Unit Agreement Name
2. Name of Operator BTA Oil Producers		8. Farm or Lease Name West 707 JV-D
3. Address of Operator 104 South Pecos, Midland, Texas 79701		9. Well No. 1
4. Location of Well UNIT LETTER "A" , 554 FEET FROM THE North LINE AND 554 FEET FROM THE East LINE, SECTION 15 TOWNSHIP 14-S RANGE 32-E NMPM.		10. Field and Pool, or Wildcat Baum Upper Penn
15. Elevation (Show whether DF, RT, GR, etc.) 4306 KB		12. County Lea

16.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☒

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.

Plugging Procedure:

35 sx @ 10,000' - TD
25 sx @ 9605 - Penn
25 sx @ 8857 - Wolfcamp
25 sx @ 7540 - Abo
25 sx @ 5348 - Glorietta
25 sx @ 4000 - (8-5/8" shoe)
Cut & pulled 8-5/8" casing @ 3100'
25 sx @ 3100' (8-5/8" stub)
25 sx @ 375' (12-3/4" shoe)
10 sx @ surface
Installed dry hole marker per NMOCC regulations.
Plugged & abandoned 11-20-70.

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

SIGNED L.D. Boyce TITLE Drilling Manager DATE 12-3-70

APPROVED BY Walter E. Clegg TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

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