Form 3160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0135 Expires November 30, 200

	BUREAU OF LAND MAN	AGEMENT			Expires November 30, 2000	
SUNDRY NOTICES AND REPORTS ON WELL O					5. Lease Serial No.	
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.			NM078148 6. If Indian, Allottee or Tribe Name			
				o. Rings	an, Allottee or Tribe Name	
SUBMIT IN TI	RIPLICATE - Other inst	ructions on reve	urso sido	1 1611 1		
				/. It Unit	or CA/Agreement, Name and/or No.	
1. Type of Well	TY . TITTI			-		
Oil Well Gas Well Other WIW 2. Name of Operator				8. Weil N	Name and No.	
BTA Oil Producers					nch, 9004 JV-P #3	
3a Addense				9. APIW	/ell No.	
104 S. Pecos, Midland, TX 79701 (915) 682-3753					025-31206	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				10. Field a	and Pool, or Exploratory Area	
1980' FNL & 510' FEL				LI Court	bin Wolfcamp, South y or Parish, State	
-H-, Sec. 24, T18S, R32E				in county	y of Pansit, State	
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, RE				Lea	County, NM	
TOTAL OF THE A	T BOX(ES) T	O INDICATE NA	TURE OF NOTICE, I	REPORT, O	R OTHER DATA	
TYPE OF SUBMISSION	TYPE OF SUBMISSION TYPE OF ACTION					
Notice of Land	☐ Acidize	Deepen Deepen	Production (Sta			
☐ Notice of Intent	Alter Casing	Fracture Treat	Reclamation	ivicsume)	Water Shut-Off	
XX Subsequent Report	Casing Repair	New Constructio			Well Integrity	
Final Abandonment Notice	Change Plans	Plug and Abando	n X Temporarily Al	bandon	U Other	
	Convert to Injection	Plug Back	Water Disposal		ork and approximate duration thereof.	
BTA Oil Producers 8/20/2002 S 8/21/2002 L	completed work of et wireline COBP oad csg w/65 bbls Chart attached.)	n this well a @ 10,300' w/9 2% KCl. Tes Return to Sh	as follows: 50' cmt on top.		it reports shall be filed within 30 days val, a Form 3160-4 shall be filed once been completed, and the operator has in — held OK.	
14. I hereby certify that the foregoing Name (Printed/Typed)	Abandon	proval of Te ment Expires	трога гу 9/3/0	7		
Pam Inskeep		1	_			
		Title	Regulatory Ad	lministra	ator	
Signature # M	akon	Date	08/26/2002			
	THIS SPACE F	OR FEDERAL OR	STATE OFFICE USE			
A			OFFICE USE	· · · · · · · · · · · · · · · · · · ·		
Approved by			Title		ate	
Conditions of approval, if any, are attached. Approval of this notice does not we certify that the applicant holds legal or equitable title to those rights in the sub-which would entitle the applicant to conduct operations thereon.			Office	_ _		
Title 18 U.S.C. Section 1001 and Titl States any false, fictitious or frauduler	e 43 U.S.C. Section 1212, make at statements or representations as	it a crime for any person to any matter within it	n knowingly and willfully s jurisdiction.	to make to an	y department or agency of the United	