

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 *Attn: Bonnie*  
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. 30-025-29551 ✓
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. LG-7965
7. Lease Name or Unit Agreement Name Buckeye -B-, 8601 JV-P
8. Well No. 2
9. Pool name or Wildcat Double -A- Abo, South
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3890' GR 3905' RKB

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER SWD
2. Name of Operator BTA Oil Producers
3. Address of Operator 104 S Pecos, Midland, TX 79701
4. Well Location Unit Letter G : 1980 Feet From The North Line and 1980 Feet From The East Line Section 36 Township 17S Range 35E NMPM Lea County

11.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	
OTHER: <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: Lowered Packer <input checked="" type="checkbox"/>	

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.

2-19-93: MIRU - POH w/tbg & pkr

2-20-93: GIH w/1 jt 2-7/8" tbg as tail pipe @ 9243', 5-1/2" Baker lockset nickel plated packer @ 9211', Nickel plated on-off tool, 280 jts of 2-7/8" ceramic coated tbg, Circ hole w/packer fluid, Tested packer to 500 psi OK, Ran test chart.

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 3-2-93  
TYPE OR PRINT NAME Dorothy Houghton TELEPHONE NO. (915) 682-3753

(This space for State Use)

ORIGINAL SIGNED BY JERRY GANTON  
DISTRICT SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

MAR 04 1993

