## State of New Mexico

inerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office			Revised 1.1-07
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVA		WELL, API NO.
P.O. Box 2088			30-025-33053
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa re, New Me	xico 8/304-2088	5. Indicate Type of Lease  STATE X  FEE
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas Lease No.
		<del></del>	VA646
SUNDRY NOTIC ( DO NOT USE THIS FORM FOR PROF	CES AND REPORTS ON POSALS TO DRILL OR TO DE		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"			7. Lease Name or Unit Agreement Name
(FORM C-1  1. Type of Well:	01) FOR SUCH PROPOSALS	.)	17336 Shipp -B-, 9206 JV-P
OIL X GAS WELL	OTHER	_	311pp -B-, 9200 3V-F
2. Name of Operator 003002 BTA 0il Producers			8. Well No.
3. Address of Operator			9. Pool name or Wildcat 33490
104 S. Pecos, Mid	land, TX 79701		Humble City, Strawn
4. Well Location			
Unit Letter : 780	Feet From The North	Line and 6	00 Feet From The West Line
Section 15	Township 17S	Range 37E	NMPM Lea County
	10. Elevation (Show w. 3774 GR	heiher DF, RKB, RT, GR, eic.)	
11. Check A	<del></del>	3787 RKB cate Nature of Notice, 1	Panart or Other Date
NOTICE OF INTI			BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	X REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	NG OPNS. , PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND O	
OTHER:		OTHER:	
12. Describe Proposed or Completed Operation	ons (Clearly state all pertinent de	tails, and give pertinent dates, inc	luding estimated date of starting any proposed
work) SEE RULE 1103.			g
Proposed P&A Procedu	ire /2ri c · · · · · · · · · · · · · · · · · ·		
Set CIBP @ 11,200' w Spot 50 sa @ 9960' (	7/35 Omt on Top	- \	
Spot 25 sx @ 6820' (	T/Glorietta)	р)	
Spot 25 sx @ 4560' (	8-5/8 Shoe)		
Spot 25 sx @ 3020' (	(B. Salt)		
Spot 25 sx @ 1600' (			
Spot 25 sx @ 460' (1			
Spot 10 sx @ Surface			
Install Dry Hole Mar	ker		
1	1		
I hereby certify that the information above is true a	and complete to the best of my knowled	ige and belief.	
SIGNATURE TOYCU X	Loyer	_ mmeOperations	Manager DATE 2-11-97
TYPE OR PRINT NAME ROYCE	Boyce		915/682-3753 TELEPHONE NO.
(This space for State Use) ORIGINAL SHOULD			_ A AN
BISTE #			· <b>"</b> " " " " " " " " " " " " " " " " " " "
APPROVED BY		TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:			

JC