

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO. 1004-0135  
Expires: November 30, 2000**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM82799
2. Name of Operator BTA OIL PRODUCERS		6. If Indian, Allottee or Tribe Name
Contact: PAM INSKEEP E-Mail: Pinskeep@btaoil.com		7. If Unit or CA Agreement, Name and/or No.
3a. Address 104 SOUTH PECOS MIDLAND, TX 79701-9988	3b. Phone No. (include area code) Ph: 915.682.3753 Ext: 139 Fx: 915.683.0325	8. Well Name and No. GRAMA RIDGE FED 02
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 9 T22S R34E NWNW 1046FNL 1273FWL		9. API Well No. 30-025-30884-00-S1
		10. Field and Pool, or Exploratory GRAMA RIDGE
		11. County or Parish, and State LEA COUNTY, NM

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Shut-In Notice
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

BTA Oil Producers respectfully requests SI status for this well, effective 11/19/2002. This well was Shut-In due to economics.

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #18041 verified by the BLM Well Information System For BTA OIL PRODUCERS, sent to the Hobbs Committed to AFMSS for processing by Armando Lopez on 01/30/2003 (03AL0047SE)	
Name (Printed/Typed) PAM INSKEEP	Title AUTHORIZED SIGNATURE
Signature (Electronic Submission)	Date 01/28/2003

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By <b>(ORIG. SDD.) JOE G. LARA</b>	Title <b>Assistant Engineer</b>	Date <b>3/26/03</b>
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office <b>CFC</b>	

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**\*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\***