

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Div.
P.O. Box 1980
Hobbs, NM 88241

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	7. If Unit or CA. Agreement Designation
2. Name of Operator BTA Oil Producers	8. Well Name and No. 2 Grama Ridge Fed, 8817 JV-P
3. Address and Telephone No. 104 S. Pecos, Midland, TX 79701 (915)682-3753	9. API Well No. 30-025-30884
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1046' FNL & 1273' FWL Sec 9, T22S, R34E	10. Field and Pool, or Exploratory Area Grama Ridge, Morrow
	11. County or Parish, State Lea Co., N.M.

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Status Change</u>
	<input checked="" type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

11-22-96: SITP 2100
Opened up well & producing:
1614 MCFD, 3 BN, 116 BW, 1100 TP

DEC 5 1996

14. I hereby certify that the foregoing is true and correct
Signed Carolyn Newkirk Title Regulatory Administrator Date 12-3-96
(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: