Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

Revised 1-1-89

P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATIO		WELL API NO.
DISTRICT II	P.O. Box 208		30-025-31739
P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico	67304-2088	5. Indicate Type of Lease STATE X FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.
SUNDRY NOT	ICES AND REPORTS ON WEL	LS	LG 485
(DO NOT USE THIS FORM FOR PR DIFFERENT RESE (FORM (OPOSALS TO DRILL OR TO DEEPEN RVOIR. USE "APPLICATION FOR PE 2-101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
1. Type of Well: OIL GAS WELL X	OTHER		State -2-, 8016 JV-P Com
2. Name of Operator			8. Well No.
BTA Oil Produce 3. Address of Operator	rs		9. Pool name or Wildcat
104 S. Pecos, M	idland, TX 79701		Antelope Ridge, Morrow
4. Well Location			
Unit Letter _ L : 198	O Feet From The South	Line and990	Feet From The West
Section 2	Township 23S Ra	unge 34E j	NMPM Lea Coun
	10. Elevation (Show whether	DF, RKB, RT, GR, etc.)	NMPM Lea Coun
11. Check	Appropriate Box to Indicate 1		enort or Other Data
NOTICE OF IN			SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB X
OTHER:		OTHER:	-
12. Describe Proposed or Completed Operawork) SEE RULE 1103.	ntions (Clearly state all pertinent details, an	d give pertinent dates, includ	ing estimated date of starting any proposed
·			
WOC,	10,373', Cmtd 7" 29# P Set slips & cut off, In /10 ppg brine wtr, WOC	stalled spool &	10373' w/2000 sx, BOP's, Tstd csg to 2500
5-13-93: Pmpd Fille	600 sx "Thixset" cmt do d to surface, Drlg "DV"	wn 9-5/8 X 7" a: tool @ 6510', i	nnulus in stages, Drlg 6-1/8" hole.
		•	
I hereby certify that the information shows is the	yand complete to the total of my thowiedge and	belief.	
SIGNATURE MORELLIS	VARILA (an)	Regulatory Adı	ninistrator DATE 5-14-93
TYPEOR PRINT NAME DOTOTALY HO	oughton		TELEPHONE NO.915-682-
(This space for State Use)			
STATE OF THE STATE			en e
APPROVED BY	mı	E	DATE
CONDITIONS OF APPROVAL, IF ANY:			·