

Submit 3 Copies To Appropriate  
District Office  
District I  
1625 N French Dr , Hobbs, NM 88240  
District II  
1301 W Grand Ave , Artesia, NM 88210  
District III  
1000 Rio Brazos Rd , Aztec, NM 87410  
District IV  
1220 S St Francis Dr , Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
June 16, 2008

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 )		WELL API NO. 30-045-33811
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator <b>BURLINGTON RESOURCES OIL GAS COMPANY, LP</b>		6. State Oil & Gas Lease No. <b>FEE</b>
3. Address of Operator <b>P.O. BOX 4289, FARMINGTON NM 87499</b>		7. Lease Name or Unit Agreement Name <b>BECK</b>
4. Well Location Unit Letter <b>D</b> : <b>1000'</b> feet from the <b>FNL</b> line and <b>955'</b> feet from the <b>FWL</b> line Section <b>02</b> Township <b>029N</b> Range <b>012W</b> NMPM <b>SAN JUAN</b> County <b>NM</b>		8. Well Number <b>1S</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>6387' GR</b>		9. OGRID Number <b>14538</b>
		10. Pool name or Wildcat <b>BASIN FRUITLAND COAL</b>

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER. <input type="checkbox"/>		OTHER: <b>RE-DELIVERY</b>	<b>04/27/11</b> <input checked="" type="checkbox"/>

13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

This well was shut in more than 90 days due to downhole issues. Returned to production on 04/27/11 produced an initial MCF of **363**

TP: 58 CP: 58 Initial MCF: 363

Meter No.: 36719

Gas Co.: WFS

Project Type: REDELIVERY

RCVD JUN 4 '12  
OIL CONS. DIV.

DIST. 3

I hereby certify that the information above is true and complete to the best of my knowledge and belief

SIGNATURE Tamra Sessions TITLE Staff Regulatory Tech DATE 06/01/12

Type or print name Tamra Sessions E-mail address: tamra.d.sessions@ConocoPhillips.com PHONE: 505-326-9834

**For State Use Only**

APPROVED BY: **ACCEPTED FOR RECORD** TITLE  DATE **JUN 05 2012**

Conditions of Approval (if any):

ca