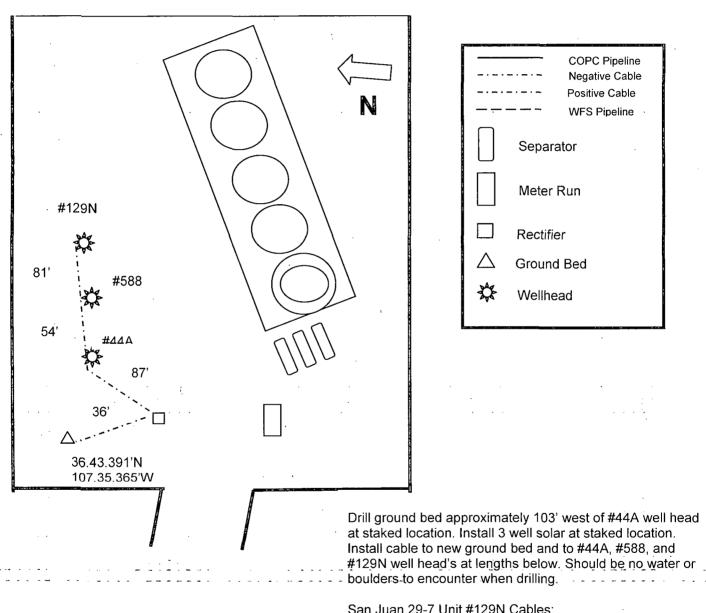
| Submit 3 Copies To Appropriate District Office  | State of New Mexico                       |            |                    | Form C-103  |                   |
|---|---|------------|--------------------|---|-------------------|
| District I  | Energy, Minerals and Natural Resources    |            |                    | Jun 19, 2008  |                   |
| 1625 N. French Dr., Hobbs, NM 88240<br>District II  | , NM 88240                                |            |                    | WELL API NO.  | 039-31087         |
| 1301 W. Grand Ave., Artesia, NM 88210   | tesia, NM 88210 OIL CONSERVATION DIVISION |            |                    | 5. Indicate Type of                                     |                   |
| District III  | 1220 South St. Francis Dr.                |            |                    | STATE D   |                   |
| 1000 Rio Brazos Rd., Aztec, NM 87410<br>District IV   | Santa Fe, NM 87505                        |            |                    | 6. State Oil & Gas                                      |                   |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505  | И   |            |                    | 1   | 10037-58          |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A   |   |            |                    | 7. Lease Name or Unit Agreement Name San Juan 29-7 Unit |                   |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH   |   |            |                    | San J   | uan 29-/ Unit     |
| PROPOSALS.)  1. Type of Well: Oil Well ☐ Gas Well ☒ Other   |   |            |                    | 8. Well Number  | 129N              |
| 2. Name of Operator   |   |            |                    | 9. OGRID Number   |                   |
| Burlington Resources Oil Gas Company LP   |   |            |                    | 14538   |                   |
| 3. Address of Operator  |   |            |                    | 10. Pool name or Wildcat                                |                   |
| P.O. Box 4289, Farmington, NM 87499-4289  |   |            |                    | Blanco MV   |                   |
| 4. Well Location  |   |            |                    |   |                   |
| Unit Letter I : 1624  |   |            | line and980        |   |                   |
| Section 17  | Township 29N                              |            | ange 7W            |   | Arriba County ·   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6682' GR   |   |            |                    |   |                   |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  |   |            |                    |   |                   |
| NOTICE OF INTENTION TO  |   |            |                    |   |                   |
| NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING   |   |            |                    |   | ALTERING CASING   |
| PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK  TEMPORARILY ABANDON  CHANGE PLANS  COMMENCE DRIL  |   |            |                    |   | P AND A           |
| PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT   |   |            |                    |   | r AND A           |
| DOWNHOLE COMMINGLE  | WIOLIN LL COMI L                          | L-J        | CAGING/OLIVILIN    | , 10D   |                   |
|   |   |            |                    |   |                   |
| OTHER:  |   |            |                    | THODIC SUNDRY   |                   |
| 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.  | ,   | ,          |                    | ·   | r - p p           |
| ATTACHED IS A DRAWING FOR   | THE DIACEMENT OF                          | THE CA     | THODIC GROUNI      | ) RECTIFIER AND   | OCARLE FOR THE    |
| SUBJECT WELL.   | THE LEACEMENT OF                          | THECA      | modic diconi       |   |                   |
|   |   |            |                    |   | CVD DEC 3'12      |
|   |   |            |                    | ***   | DIL CONS. DIV.    |
| Spud Date:  |   | Dia Dala   | ased Date:         |   | ¬ DIST.3          |
| Spud Date.  |   | Kig Keie   | ased Date.         |   | _                 |
| I hereby certify that the information :   | hove is true and complet                  | e to the h | ect of my knowledg | e and belief  |                   |
|   | - and complet                             | e to the o | est of my knowledg | e and belief.   |                   |
| SIGNATURE DANK JOT  | uney                                      | TITLE      | Regulatory Tech    | nician DATE   | 11/30/12          |
| Type or print name Denise Journe  | yE-mail address <u>:</u>                  | Denise.Je  | ourney@conocophi   | llips.com PHONE   | i: 505-326-9556   |
| For State Use Only  | D EOD DECODE                              |            |                    |   |                   |
| ACCEPTE APPROVED BY:  | D FOR RECORD                              | TITLE      |                    |   | DATE DEC 0 3 2012 |
| Conditions of Approval (if any):  |   | IIILE      | C O                |   | DAID              |
| or reproved (it uity).  |   |            | ca                 |   |                   |



## San Juan 29-7 Unit #129N

Section17, T29N, R7W, N.M.P.M., Rio Arriba County, NM



San Juan 29-7 Unit #129N Cables:

Negative=450'-

Positive: 36'

Total Ditch: 258'

By: Dwayne Horton Date: 11/26/2012