

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  
Jun 19, 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. <b>30-045-29999</b>
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. FEE
3. Address of Operator P.O. Box 4289, Farmington, NM 87499-4289		7. Lease Name or Unit Agreement Name <b>Pierce SRC</b>
4. Well Location Unit Letter <b>F</b> : <b>1445</b> feet from the <b>North</b> line and <b>1835</b> feet from the <b>West</b> line Section <b>30</b> Township <b>31N</b> Range <b>10W</b> NMPM <b>San Juan County</b>		8. Well Number <b>2B</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5956' GR		9. OGRID Number <b>14538</b>
		10. Pool name or Wildcat <b>Blanco MV/Basin DK</b>

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER: ☒ RE-DELIVERY

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 Re-Delivered on 10/22/13 and produced an initial MCF of 671. This was shut in for more than 90 days for Tank Replacement.**

TP: 345

CP: 410

Initial MCF: 671

Meter NO. 36233

Gas Co: Williams

Proj. Type: Re-Delivery

RCVD OCT 24 '13  
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 Denise Journey TITLE Regulatory Technician DATE \_\_\_\_\_

Type or print name Denise Journey Email address: Denise.Journey@conocophillips.com PHONE: 505-326-9556

**For State Use Only**

**ACCEPTED FOR RECORD**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE OCT 24 2013

Conditions of Approval (if any):

ca

RP  
dlb