

Submit 1 Copy To Appropriate District
Office
District I – (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II – (575) 748-1283
811 S. First St., Artesia, NM 88210
District III – (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV – (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

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

SUNDRY NOTICES AND REPORTS ON WELLS (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. 30-045-22437
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Burlington Resources Oil & Gas Company LP		6. State Oil & Gas Lease No. FEE
3. Address of Operator PO Box 4289, Farmington, NM 87499		7. Lease Name or Unit Agreement Name Bruington
4. Well Location Unit Letter <u>E</u> : <u>1450</u> feet from the <u>North</u> line and <u>1025</u> feet from the <u>West</u> line Section <u>25</u> Township <u>31N</u> Range <u>11W</u> NMPM San Juan County, NM		8. Well Number 1A
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5757'		9. OGRID Number 14538
		10. Pool name or Wildcat Blanco MV

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"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: REDELIVERY	

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

This well was shut in for more than 90 days due to down hole issues. Returned to production on 3/31/14 and produced an initial MCF of 140.

TP: 254 CP: 255 Initial MCF: 140
Meter # 34537

Gas Co: WFC

Project Type: REDELIVERY

RCVD APR 4 '14
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  Title Staff Regulatory Technician DATE 4/2/14

Type or print name Kenny Davis E-mail address: Kenny.r.davis@conocophillips.com PHONE: 505-599-4045

For State Use Only

ACCEPTED FOR RECORD

APPROVED BY: _____ TITLE _____ DATE APR 14 2014