Submit 3 Copies To Appropriate District	State of New M	1exico	Form C-103
Office District I	Energy, Minerals and Na	tural Resources	Jun 19, 2008
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATIO	N DIVISION	30-045-35459
District III	1220 South St. Fr		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM		STATE FEE
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	Saina i C, ivivi	07303	6. State Oil & Gas Lease No. FEE
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.)		7. Lease Name or Unit Agreement Name Heaton	
1 m		8. Well Number 1M	
2. Name of Operator Gas Well St. 3		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 8	37499-4289		Basin Dakota / Blanco Mesaverde
4. Well Location			
Unit Letter_ F : 223	feet from the North	line and 205	2 feet from the West line
Section 33	Township 31N	Range 11W	NMPM San Juan County
	11. Elevation (Show whether D	<i>PR, RKB, RT, GR, etc.,</i> 3' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF IN PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING	TENTION TO: PLUG AND ABANDON CHANGE PLANS MULTIPLE COMPL	SUB REMEDIAL WOR COMMENCE DRI CASING/CEMEN	LLING OPNS. P AND A
DOWNHOLE COMMINGLE	MOETH LE COMI L	CASING/CLIVILIN	1 306
OTHER: Change from Temporary Pit to Closed Loop System OTHER:			
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.			
Based on the onsite inspection with Jonathan Kelly/NMOCD this date, Burlington Resources will be utilizing a			
Closed Loop system on this location instead of a temporary pit as originally planned.			
Spud Date:	Rig Re	leased Date:	
I hereby certify that the information	above is true and complete to the	best of my knowledge	e and belief.
SIGNATURE TITLE Staff Regulatory Technician DATE 7-15-14			
Type or print name Dollie L. Busse E mail address: 20llie.l.busse@conocophillips.com PHONE: 505-324-6104			
For State Use Only			
(ande / 2 2 - 11 C - 8/7/11			
APPROVED BY: TITLE Tribo mantel Spa DATE 9/7/14 Conditions of Approval (if any):			

