Submit 3 Copies To Appropriate District  State of New Mexico  Office		Form C-103		
District I	Energy, Minerals and Natural Resources		WELL API NO.	Jun 19, 2008
1625 N. French Dr., Hobbs, NM 88240 District II	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.			045-09669
1301 W. Grand Ave., Artesia, NM 88210			5. Indicate Type of	
District III			STATE [	FEE 🛛
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas	
1220 S. St. Francis Dr., Santa Fe, NM	NM			FEE
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.)			7. Lease Name or Unit Agreement Name  Harvey	
1. Type of Well: Oil Well Gas Well Other			8. Well Number 1	
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			Aztec Pictured Cliffs	
4. Well Location	<del></del>		L	
Unit Letter L : 1718	feet from theSouth_	line and923	feet from the	West line
Section 9		nge 11W	<del></del> -	Juan County
	11. Elevation (Show whether DR	<del></del>		
	5588	,		
12. Check A	ppropriate Box to Indicate N	ature of Notice.	Report or Other	Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR				ALTERING CASING   '
TEMPORARILY ABANDON			<del>-</del> -	P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	ГЈОВ 🗌	
DOWNHOLE COMMINGLE				
OTHER:		OTHER:		
13 Describe proposed or comple	eted operations. (Clearly state all		d give pertinent date	s including estimated date
of starting any proposed wor	k). SEE RULE 1103. For Multip	le Completions: At	tach wellbore diagra	am of proposed completion
or recompletion.	.,, .,, .,, ., ., ., ., ., ., ., ., ., .			pp
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Due to City of Aztec constra	ints, Burlington Resources reques	ts an additional 60 d	lays to P&A the sub	ject well.
T/2 (1)	11-11 1 15			OIL CONS. DIV DIST. 3
1/A will be extended	an additional 60	aays		
Spud Date:	Rig Rele	ased Date:		MAR 26 2015
		<u> </u>		
I hereby certify that-the information a	bove is true and complete to the h	est of my knowledg	e and belief.	
Thereby certally that the information of	<sup>7</sup> 9			. ,
SIGNATURE Alle	L)use TITLE	Staff Regulatory	Technician DAT	E <u>3/25/15</u>
Type or print name Dollie L. Busse	F-mail address: dollie		P DHONE	. 505 224 6104
For State Use Only				
APPROVED BY: DEPUTY OIL & GAS INSPECTOR TITLE DISTRICT #3 DATE 4-6-15				
// //				<del></del>
APPROVED BY:				<del></del>
APPROVED BY: Conditions of Approval (if any):				<del></del>