

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

WELL API NO. 30-045-33633
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-3150-11
7. Lease Name or Unit Agreement Name FARMINGTON COM
8. Well Number 1E
9. OGRID Number 14538
10. Pool name or Wildcat BASIN DAKOTA

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.)

1. Type of Well: Oil Well ☐ Gas Well ☒ Other

2. Name of Operator
BURLINGTON RESOURCES OIL & GAS, LP

3. Address of Operator
P.O. Box 4289; Farmington, NM 87499-4289

4. Well Location
Unit Letter: E; 1630' feet from the NORTH lined 815' line and WEST feet from line
Section 36 Township 31N Range 13W NMPM SAN JUAN County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
6012' GL

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 ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER – Wellhead seals repaired ☒

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.

Attached you will find the Report from Antelope where they repaired the well head seals on the Farmington Com 1E on 8/15/14. The good Bradenhead test was conducted on 4/28/15.

OIL CONS. DIV DIST. 3

AUG 14 2015

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Patsy Clugston TITLE Staff Regulatory Technician DATE: 8/13/15

Type or print name Patsy Clugston E-mail address: Patsy.L.Clugston@conocophillips.com PHONE: 505-326-9518

For State Use Only

APPROVED BY: Monica Kuchling TITLE DEPUTY OIL & GAS INSPECTOR DISTRICT #3 DATE 8-25-15
Conditions of Approval (if any): RV

2
WW

ANTELOPE SALES & SERVICE, INC.

16825

FIELD SERVICE ORDER (FSO) AND JOB SAFETY ANALYSIS (JSA)

Date <u>08/15/14</u>	JOB ORDER No. <u>76XV.1405</u>	FWO NO.	CUST CHARGE CODE / PO
Customer <u>CENOCO</u>	Location / Lease <u>FARMINGTON CON. HIE</u>	Rig Name & No. / Ordered By: <u>RUN 102, ARRA1 / RICHARD LODGE</u>	
PPE: Steel Toed Boots <input checked="" type="checkbox"/> Hard Hat <input checked="" type="checkbox"/> Safety Glasses <input checked="" type="checkbox"/> Gloves <input checked="" type="checkbox"/> Fall Coversalls <input checked="" type="checkbox"/> Other:			

JOB SCOPE:

TEST SEALS FOR INTEGRITY IF NEEDED) PACK OFF.

(JSA) STEP DESCRIPTION	SAFETY CONCERNS / POTENTIAL HAZARDS	RECOMMENDED ACTION/SAFETY PROCEDURE
DRIVE TO LOCATION RIG UP	SUBS DIPS & FALLS	USE PROPER FASTENING
TEST PUMP TO WELL HEAD	PINCH POINTS	USE PROPER LUBE
TEST SEAL SUB & INTERMEDIATE	PRESSURE	BLEED OFF ALL PRESSURE BEFORE DISCONNECTING, & REMOVING BODY LUBE FITTINGS.
IF NEEDED PACK OFF W/ PLASTIC.		
	TRAFFIC & ROAD CONDITIONS.	USE CAUTION WATCH SPEED, WEAR SEAT BELT, BE AWARE OF SURROUNDINGS

Review of Emergency Routes / Assembly Points: MAIN ENTRANCE.

Service Performed / Recommendations:

LEAD UP AT SHOP, DROVE TO LOCATION, FULFILL JSA RIG UP TO ADAPTER TO TEST SEAL SUB & HANGERS. TEST @ 1500 PSI FOR 10 MIN. GOOD TEST. RIG UP TO INTERMEDIATE DID NOT PASS. RIG UP P.I.G. TO INTERMEDIATE & PACK OFF W/ PLASTIC PACK RUMPTED IN FIVE STICKS INTO FLANGE. TESTED TO 1500 PSI FOR 10 MIN. GOOD TEST, DROVE TO NEXT WELL.

Additional Equipment Used at this Job or Returned to ASSI Facility

EQ. SN / REN / CPN	Description	QTY	USED FOR JOB/RETURN TO ASSI

Field Service Related Expense

Time In: Date <u>15</u> day of <u>08</u> , 20 <u>14</u> at <u>8:00</u> <u>AM</u> / PM	TTL: _____	TOTAL HOURS ON THE JOB: <u>3.5</u>
Time Out: Date <u>15</u> day of <u>08</u> , 20 <u>14</u> at <u>11:30</u> <u>AM</u> / PM	TTL: _____	

(PID) Description	QTY	COST/PER	Item Total
(83) Field Service Technician (Hours)	<u>3.5</u>	<u>\$62.50</u>	<u>\$218.75</u>
(86) Service Unit <u>856</u> Miles (Round Trip)	<u>19</u>	<u>\$1.75</u>	<u>\$33.25</u>
<u>HYDRAULIC TEST PUMP.</u>	<u>1</u>	<u>\$25.00</u>	<u>\$25.00</u>
<u>PLASTIC INJECTION GUN (P.I.G.)</u>	<u>1</u>	<u>\$175.00</u>	<u>\$175.00</u>
<u>TEFLON PLASTIC PACK</u>	<u>5</u>	<u>\$18.00</u>	<u>\$90.00</u>

Service Total: ~~\$490.00~~ \$542.00

Customer Satisfaction: 1 - Unsatisfactory 2 - Needs Improvement 3 - Satisfactory 4 - Good 5 - Excellent

On-Time Delivery and Product Quality: Rate: _____	Customer Comment(s):
Service / Equipment / Personnel Performance Rate: _____	
Meet Customer Specific Requirements / Expectations: Rate: _____	

I have read and understand the terms of this agreement including the conditions printed on the back and represent that I am fully authorized to execute the same as agent for the customer.

Customer Signature: _____	We Appreciate Your Business! Questions? Please Contact Us At: Antelope Sales & Service Inc. Visit Us At: NMASSI.com 505.327.0918
Customer Print Name: _____	
ASSI Representative: <u>Philbert Dale</u>	