Submit 3 Copies To Appropriate District Office	State of New Mexico			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	OH, GONGERNA TION DRUGION		The second of th	045-33283
1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION		5. Indicate Type o	of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr. Santa Fe, NM 87505		STATE D	
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	Salita PC, INIVI 67303		6. State Oil & Gas E-	3150-11
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			7. Lease Name or Unit Agreement Name San Juan 32-9 Unit	
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well 🛛 Other		8. Well Number 230S	
2. Name of Operator OIL CONS. DIV DIST. 3			9. OGRID Number	
Burlington Resources Oil Gas C	as Company LP		14538	
3. Address of Operator P.O. Box 4289, Farmington, NM 8	DEC 1 5 2015		10. Pool name or Wildcat Basin Fruitland Coal	
4. Well Location	17477-4207	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Dasin F	ruitianu Coar
Unit Letter F : 182	5 feet from the North	line and 14'	70 feet from the	West line
Section 36		Range 10W		Juan County
	11. Elevation (Show whether DI			
'GR				
12. Check A	Appropriate Box to Indicate N	Nature of Notice,	Report or Other I	Data
NOTICE OF IN PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE	EMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK LY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS TER CASING MULTIPLE COMPL CASING/CEMENT JOB		ILLING OPNS.	PORT OF: ALTERING CASING D P AND A D
OTHER:	П	⊠ Location is	ready for OCD ins	spection after P&A
*Twinned with San Juan 32-9 Uni		Z Location is	ready for OOD ins	spection after r an
Rat hole and cellar have been fi A steel marker at least 4" in dia OPERATOR NAME, LE UNIT LETTER, SECTIO	n compliance with OCD rules and a led and leveled. Cathodic protect meter and at least 4' above ground ASE NAME, WELL NUMBER, DN, TOWNSHIP, AND RANGE. PED ON THE MARKERS SUR	ion holes have been level has been set in API NUMBER, QUALL INFORMAT	properly abandoned. n concrete. It show th UARTER/QUARTE	R LOCATION OR
other production equipment. (S Anchors, dead men, tie downs a If this is a one-well lease or last OCD rules and the terms of the removed from lease and well lo All metal bolts and other materi have to be removed.) (SEE AT All other environmental concern	and risers have been cut off at least remaining well on lease, the batter Operator's pit permit and closure potation. (SEE ATTACHED) als have been removed. Portable by TACHED) as have been addressed as per NMG een abandoned in accordance with	two feet below grown and pit location(s plan. All flow lines pases have been removed.	und level. (SEE ATT) have been remediate, , production equipme loved. (Poured onsite	CACHED) ed in compliance with nt and junk have been concrete bases do not
When all work has been completed,	return this form to the appropriate	District office to scl	nedule an inspection.	
SIGNATURE SILLIN	Busse TITLE	Regulatory Technici	ian DATE 12/1	14/15
Type or print name Dollie L. Bus For State Use Only APPROVED BY: Conditions of Approval (if any):	Se_E-mail address: dollie.l.buss	e@conocophillips.c	~~	DATE 3/11/2016