Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103
District I	Energy, Minerals and Natural Resources		Jun 19, 2008
1625 N. French Dr., Hobbs, NM 88240			WELL API NO. 30-045-35579
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease
District III	1220 South St. Francis Dr.		STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			V-88-1
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 Susco 16 State	
PROPOSALS.)			8. Well Number 101H
Type of Well: Oil Well 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		Basin Fruitland Coal	
4. Well Location			
Unit Letter K : 2000 feet from the South line and 1691 feet from the West line			
Section 15		inge 8W	NMPM San Juan County
Section 15	11. Elevation (Show whether DR,		
	6916		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
in the state of th			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING			
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A			
PULL OR ALTER CASING			
DOWNHOLE COMMINGLE			
OTHER: APD EXTENSION 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.			
			Oll passe
OIL CONS. DIV DIST. 3			
Burlington Resources requests permission to extend the APD approval for the subject well.			
JUN 0 3 2016			
Spud Date: Rig Released Date:			
Extension approved expires 1/28/2017			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE TITLE Regulatory Technician DATE 6-1-16			
Type or print name Dollie L. Busse E-mail address: dollie.l.busse@conocophillips.com PHONE: 505-324-6104			
For State Use Only			
APPROVED BY: TITLE FPUTY DIL & GAS INSPECT DOATE 4/3/16			
Conditions of Approval (ff any):			
Comply with current regulations at time of spud			

ADHERE TO PREVIOUS NMOCD CONDITIONS OF APPROVAL

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