Submit 1 Copy To Appropriate District	Chate - CN Mar		Farm C 102
Office	State of New Mexico		Form C-103 Revised July 18, 2013
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION		ELL API NO.
District II - (575) 748-1283			30-045-35630
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178			Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE FEE
District IV - (505) 476-3460	Santa Fe, NM 87505		State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			FEE
SUNDRY NOTICES AND REPORTS ON WELLS			Lease Name or Unit Agreement Name
(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		PSUCH	Calloway
PROPOSALS.)		8.	Well Number
1. Type of Well: Oil Well			1M
2. Name of Operator BURLINGTON RESOURCES OIL & GAS, LP		9.	OGRID Number
3. Address of Operator		10	14538 Pool name or Wildcat
P.O. Box 4289; Farmington, NM 87499-4289		10.	Blanco Mesaverde / Basin Dakota
4. Well Location			
Unit Letter: G	1818feet from theN line	e 1788 feet from	E line
Section 27	Township 31N	Range 11W NME	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
5732' 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 OTHER CLOSED-LOOP SYSTEM OTHER OTHER: APD EXTENSION 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. Burlington Resources would like to extend the APD approval for the subject well. DEC 1 4 2016 Spud Date: Rig Release Date: Image Release Date:			
I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE SIGNATURE SIGNATURE DATE: 12/01/2016			
Type or print name <u>Dollie L. Busse</u> E-mail address: <u>Dollie.L.Busse@conocophillips.com</u> PHONE: <u>505-324-6104</u> For State Use Only			
APPROVED BY: STRICT #3 DATE 12/19/2016			
ADHERE TO PRE //OUS NMOCD			
	CONDITIONS OF APPE	ROVAL	

Jr3