Submit 3 Copies To Appropriate District	State of New Mexico		Form C-103	
Office District I	Energy, Minerals and Natural Resources		Revised May 08, 2003	
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-045-30975 5. Indicate Type	of Loose
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 & G		
1220 S. St. Francis Dr., Santa Fe, NM 87505				
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name of	or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUGBACK TO A				
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SLICH A PROPOSALS.)			Hubbard	
1. Type of Well:		E- 48-20	8. Well Number 2B	
Oil Well Gas Well	Other	2003	2 D	
2. Name of Operator	War C	3	9. OGRID Numl	per
Burlington Resources Oil & Gas Co	mpany LP		14538	
3. Address of Operator PO Box 4289, Farmington, NM 874	400		10. Pool name of Blanco Mesavero	
4. Well Location	***		Bianco Mesavere	ic
4. Well Education				
Unit LetterP:	_910feet from theSouth	line and	1840feet fro	om theEastline
Section 11	Township 32N	Range 12W	NMPM	San Juan County
	11. Elevation (Show whether DR			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	· ⊔	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRII	LLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE	CASING TEST AND		
	COMPLETION	CEMENT JOB		
OTHER:		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.				
Of recompletion.				
6/15/03 RU. TIH w/gauge ring to 5482'. Ran CBL-GR-CCL @ 5479' to 2820', and GR-CCL @ 2820' to surface.				
TOC @ 2935'. RD.				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE Tammy W)	msatt TITLE	Regulatory Speciali	et	DATE 9/2/2003
0	•	Tropulatory phociali		
Type or print name Tammy Wimsatt Telephone No. (505) 326-9700				
(This space for State use)	DEPUTY	OIL & GAS INSPECTO		0=2
APPPROVED BY	TITLE	a GAS INSPECTO	R. DIST 200	SEP - 4 2003
Conditions of approval, if any:	IIILE		, 5.00 EM	_DVIE