

District I

1625 N. French Dr., Hobbs, NM 88240
Phone:(505) 393-6161 Fax:(505) 393-0720

District II

1301 W. Grand Ave., Artesia, NM 88210
Phone:(505) 748-1283 Fax:(505) 748-9720

District III

1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170

District IV

1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources

Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-103
Permit43274

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVIOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NUMBER 30-039-29996
1. Type of Well: G		5. Indicate Type of Lease P
2. Name of Operator BURLINGTON RESOURCES OIL & GAS COMPANY LP		6. State Oil & Gas Lease No.
3. Address of Operator 3401 E. 30TH STREET, FARMINGTON, NM 87402		7. Lease Name or Unit Agreement Name SAN JUAN 27 4 UNIT
4. Well Location Unit Letter <u>I</u> : <u>1536</u> feet from the <u>S</u> line and <u>985</u> feet from the <u>E</u> line Section <u>18</u> Township <u>27N</u> Range <u>04W</u> NMPM Rio Arriba County		8. Well Number 044G
11. Elevation (Show whether DR, KB, BT, GR, etc.) 6637 GR		9. OGRID Number 14538
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		10. Pool name or Wildcat

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> Other: _____		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> Other: Spud <input checked="" type="checkbox"/>
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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.

12/8/2006 Spudded well.

12/7/06 MIRU BC #4.SPUD 12 1/4" hole 12/8/06.Drill ahead to 236'.RIH w/5jts 9 5/8" J55 ST&C csg and set @ 230'.Pump 11sxs (26cu-5bbls)scavenger cmt w/3% CaCl2, .25pps Cell-o-flake, 6.25pps LCM1, 1% FL52. Followed w/ 161sxs(202cu-36bbls)Type 3cmt w/3% CaCl2, .25pps Cello-flake, .2% FL52.Circulated 15bbls of cmt to reserve pit.WOC.NUBOP.PT csg to 600psi for 30mins.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NM OCD guidelines ☐ a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE [Signature] TITLE _____ DATE _____
 Type or print name _____ E-mail address _____ Telephone No. _____

For State Use Only:

APPROVED BY: H. Villanueva TITLE Deputy Oil & Gas Inspector, DATE AUG 13 2007
District #3

RCVD AUG 13 '07
 OIL CONS. DIV.
 DIST. 3

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