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Office	Energy, Minerals and Natural Resources			Form C-103 Revised May 08, 2003	
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.			
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION			30-045-31213 5. Indicate Type of Lease		
District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410		STATE FEE			
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 Santa Fe, NM 87505			6. State Oil & Gas Lease No.		
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 Allison Unit		
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other CBM			8. Well Number 130S		
2. Name of Operator			9. OGRID Number		
2. Name of Operator Burlington Resources Oil & Gas Company LP			14538		
3. Address of Operator			10. Pool name or Wildcat		
PO Box 4289, Farmington, NM 87499 4. Well Location			Basin Fruitland Coal		
4. Well Location				•	
Unit LetterO:175feet from the	South	line and212	20feet from	the East line	
Section 24 Township 32N Range 7W NMPM San Juan County					
11. Elevation (Show 6432' GR	whether DR,	, RKB, RT, GR, etc.,)		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDO	ON 🗌	SUB REMEDIAL WOR	SEQUENT RE	EPORT OF: ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS		COMMENCE DRILLING OPNS.⊠ PLUG AND ☐ ABANDONMENT			
PULL OR ALTER CASING		CASING TEST AN CEMENT JOB	ND 🗆		
OTHER:		OTHER:			
 Describe proposed or completed operations. (Clea of starting any proposed work). SEE RULE 1103. or recompletion. 					
11/18/03 MIRU.					
11/19/03 Spud well @ 11:00 am 11/19/03. Drill to 150'. Circ hole clean. TOOH. TIH w/3 jts 9-5/8" 32.3# H-40 ST&C csg, set @ 147'. Cmtd w/123 sxs Type III cmt w/2% calcium chloride, 0.25 pps cellophane (173 cu. ft.). Circ					
8 bbls cmt to surface. WOC. 11/20/03 NU BOP. PT BOP & csg to 600 psi/30 mins, OK. Drilling ahead.					
APD ROW Related					
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE TammyWem all		Regulatory Special		DATE11/21/2003	
Type or print name Tammy Wimsatt			Tele	ephone No. (505) 326-9700	
(This space for State use)	DEPIITY	OIL & GAS INSPEC		NOV 2 4 2003	
APPPROVED BY half Conditions of approval, if any:	_TITLE		wiene Elen	DATE	