Submit 3 Copies To Appropriate District	State of New Mexico			Form C-103		
Office District I	Energy, Minerals and Natural Resources			Jun 19, 2008		
1625 N. French Dr., Hobbs, NM 88240				WELL API NO.		
District II	OIL CONSERVATION DIVISION			30-045-34819		
1301 W. Grand Ave., Artesia, NM 88210				5. Indicate Type	e of Lease	
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.			STATE FEE		
District IV	Santa Fe, NM 87505			6. State Oil & C	Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM						
87505						
SUNDRY NOTICES AND REPORTS ON WELLS				7. 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				Dec	eker	
PROPOSALS.)						
1. Type of Well: Oil Well ☐ Gas Well ☒ Other				8. Well Number 2M		
2. 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 DK/ Blanco MV		
				Dusin	Dis Blanco IV	
4. Well Location						
Unit Letter P: 730	feet from the	South	line and 755'	feet from the	East	line
Section 26	Township 32N	l R	ange 12W	NMPM Sa	n JuanCounty	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)						
6458' GR						
12. Check	Appropriate Box to I			Report or Othe	r Data	The second secon
	-FFF			r		
NOTICE OF INTENTION TO: SUBS				SEQUENT RE	EPORT OF:	: 1
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR				к 🗆	ALTERING (CASING 🔲 🗀
TEMPORARILY ABANDON 🔲 CHANGE PLANS 🔲 COMMENCE DR				LLING OPNS.	P AND A	\Box
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN						
			0,1011101101111111111111111111111111111			
OTHER: Cut casing for reuse		\boxtimes	OTHER:			
13. Describe proposed or comp	oleted operations. (Clear	ly state all	pertinent details, and	d give pertinent da	tes, including e	estimated date
of starting any proposed w	ork). SEE RULE 1103.	For Multip	le Completions: At	tach wellbore diag	gram of propose	ed completion
or recompletion.		_	-			_
_						
3/18/09 Contacted Kelly Roberts (0						
The intermediate casing setting dep	th was @ 4986' and the ?	ΓOC was fo	ound to be @ 4380'.	Request to remov	e approximatel	y 4200' of
casing. Verbal approval received fro	om Kelly Roberts 3/18/09	€.				
Spud Date: 9/26/08		Rig Rel	eased Date:			
						
I hereby certify that the information						
grade tank has been/will be constructed or	_	guidelines L	, a general permit ⊠	or an (attached) after	native OCD-appr	ovea pian ∐.
SIGNATURE Mich 111	Noncor	TITLE	Staff Regulatory To	echnician DATI	E 03/18/2	
SIGNATURE		_1111	Stair Regulatory To	cennetan DATI	03/10/2	007
Type or print name Tracey N. Mon	roe E-mail address: 7	racev N M	[onroe@conoconhill	ins com	PHONE: 505	5-326-9752
For State Use Only	100 D man address. 1	•		•	1110112. 20.	<u> </u>
	5 • •	Da	nuty Oil & Ga	s Inspector	888	n o o 2000
APPROVED BY: Cally G.	Ko Jat	TITLE	eputy Oil & Ga District	#2	DATE	VR 2 0 2009
Conditions of Approval (if any):		_ ~ ~ * * * * * * * * * * * * * * * * *	DISTRICT	# 3		
Conditions of Aspproval (if any).					RCVD HAR 1	9'03
to the second se						
					OTL CONS.	LILW.
					DIST. S	**************************************