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LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-3148-2
7. Unit Agreement Name
8. Farm or Lease Name Burroughs
9. Well No. 11
10. Field and Pool, or Wildcat S. Blanco Pic. Cliffs
12. County San Juan

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 PROPOSALS.)

OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>
Name of Operator El Paso Natural Gas Company		
Address of Operator P. O. Box 4289, Farmington, NM 87499		
Location of well UNIT LETTER <u>B</u> <u>1080</u> FEET FROM THE <u>North</u> LINE AND <u>1450</u> FEET FROM THE <u>East</u> LINE, SECTION <u>2</u> TOWNSHIP <u>26N</u> RANGE <u>8W</u> NMPM.		

15. Elevation (Show whether DF, RT, GR, etc.)
6150' GL

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
OTHER ☐

7. 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.

This well was first delivered February 3, 1986 and produced natural gas and entrained hydrocarbons.

RECEIVED

FEB 04 1986

OIL CON. DIV.
DIST. 3

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Frank T. Chavez

TITLE Drilling Clerk

DATE 2-3-86

APPROVED BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 3

DATE FEB - 4 1986

CONDITIONS OF APPROVAL, IF ANY: