

# BURLINGTON RESOURCES

SAN JUAN DIVISION

Release 7-22-04

June 28, 2004

(Certified Mail – Return Receipt Requested)

Re: EPNG Com C #100T  
Basin Fruitland Coal  
595'FNL, 670'FWL Section 16, T-32-N, R-10-W  
San Juan County, New Mexico

To the Affected Persons:

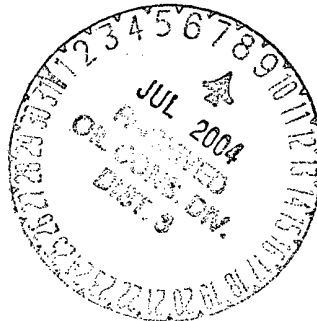
Burlington Resources Oil & Gas Company LP is submitting the enclosed Application for Permit to Drill to the appropriate regulatory agency(s) for approval. This well is located inside the High Productivity Area of the Basin-Fruitland Coal Pool as indicated on the attached plat. Notice is being made pursuant to New Mexico Oil Conservation Commission Order R-8768-F dated July 17, 2003.

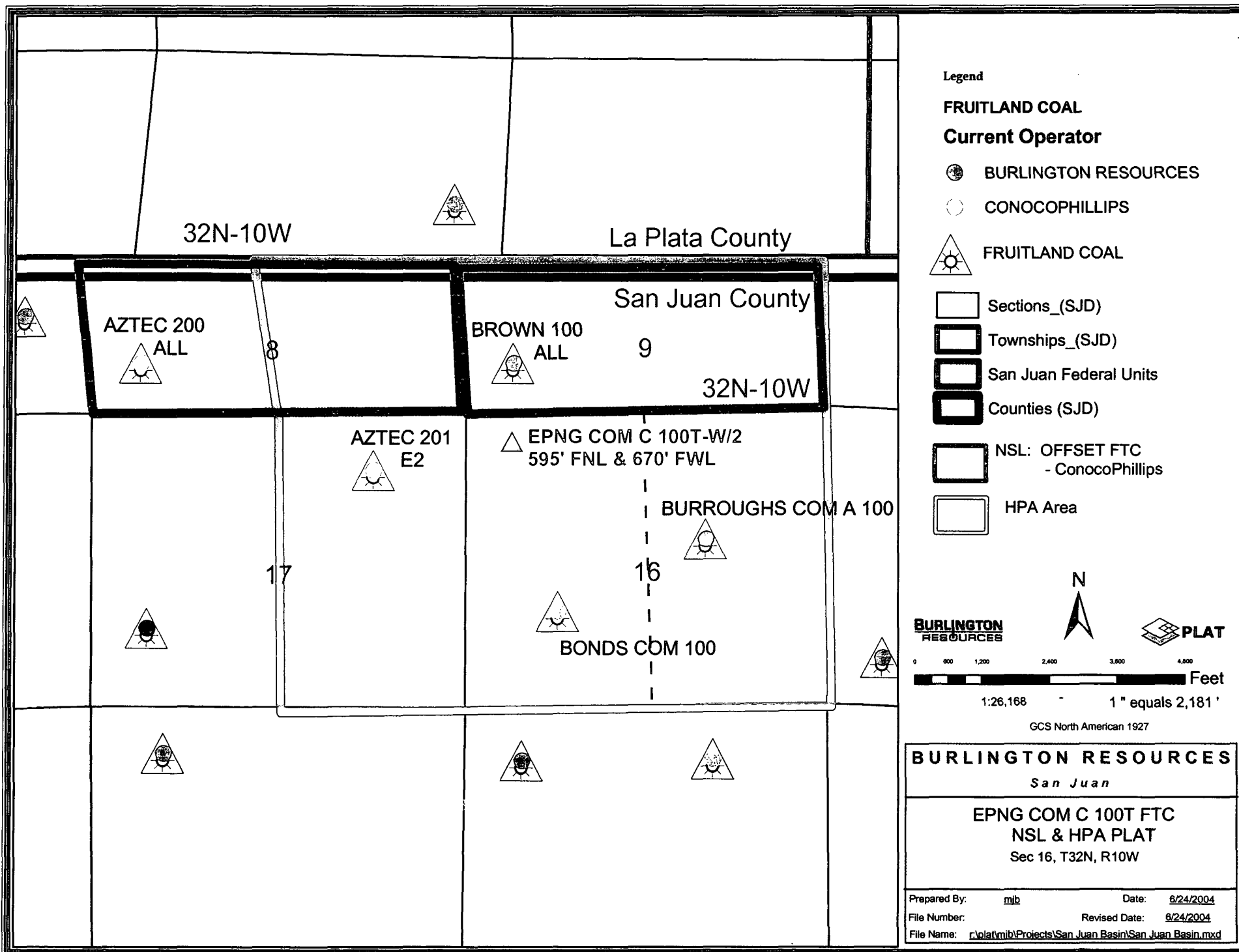
The affected parties have twenty (20) days from receipt of this notice in which to file with the District Office of the New Mexico Oil Conservation Division written objection to the proposed Application for Permit to Drill.


Sincerely,


*Joni Clark*


Joni Clark  
Regulatory Specialist






2. Article Number	COMPLETE THIS SECTION ON DELIVERY
 <div style="border: 1px solid black; padding: 2px; display: inline-block;">7110 6605 9590 0008 6520</div>	<p>A. Signature  X <u>Earl Ripley</u> <span style="float: right;"><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p>B. Received by (Printed Name)  <u>EARL RIPLEY</u></p> <p>C. Date of Delivery  <u>7-2-04</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center; margin-top: 20px;"><b>JOHN S BROWN JR</b>  <b>7301 BURNET RD STE 102-122</b>   <b>AUSTIN, TX 78757-2248</b></p> <p>6/24/2004 5:19 PM</p>	<p>3. Service Type <span style="float: right;"><input checked="" type="checkbox"/> <b>Certified</b></span></p> <p>4. Restricted Delivery? (Extra Fee) <span style="float: right;"><input type="checkbox"/> Yes</span></p>
Code: EPNG COM C 100T FTC - NSL/HPA	
PS Form 3811 <span style="float: right;">Domestic Return Receipt</span>	

2. Article Number	COMPLETE THIS SECTION ON DELIVERY
 <div style="border: 1px solid black; padding: 2px; display: inline-block;">7110 6605 9590 0008 6537</div>	<p>A. Signature  X <u>Bob Valdez</u> <span style="float: right;"><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p>B. Received by (Printed Name)  <u>BOB VALDEZ</u></p> <p>C. Date of Delivery  <u>7-1-04</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES enter delivery address below: <input checked="" type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center; margin-top: 20px;"><b>JRP SAN JUAN LP</b>  <b>ATTN JAMES M RAYMOND MGR</b>  <b>PO BOX 291445</b>   <b>KERRVILLE, TX 78029-1445</b></p> <p>6/24/2004 5:19 PM</p>	<p>3. Service Type <span style="float: right;"><input checked="" type="checkbox"/> <b>Certified</b></span></p> <p>4. Restricted Delivery? (Extra Fee) <span style="float: right;"><input type="checkbox"/> Yes</span></p>
Code: EPNG COM C 100T FTC - NSL/HPA	
PS Form 3811 <span style="float: right;">Domestic Return Receipt</span>	

<b>2. Article Number</b>		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
 7110 6605 9590 0008 6513		<b>A. Signature</b> X <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
<b>1. Article Addressed to:</b>  <b>CONOCOPHILLIPS COMPANY</b> <b>ATTN CHIEF LANDMAN SAN JUAN/ROCKIES</b> <b>PO BOX 2197</b>  <b>HOUSTON, TX 77252-2197</b>  6/24/2004 5:19 PM Code: EPNG Com C 100T		<b>B. Received by (Printed Name)</b>	<b>C. Date of Delivery</b> JUN 01 2004
		<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
		<b>3. Service Type</b>	<input checked="" type="checkbox"/> <b>Certified</b>
		<b>4. Restricted Delivery? (Extra Fee)</b>	<input type="checkbox"/> Yes
PS Form 3811 Domestic Return Receipt			

<b>2. Article Number</b>		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
 7110 6605 9590 0008 6544		<b>A. Signature</b> X <i>M. Johnson</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
<b>1. Article Addressed to:</b>  <b>T H MCELVAIN OIL &amp; GAS LTD</b> <b>PARTNERSHIP</b> <b>1050 17TH ST STE 1800</b>  <b>DENVER, CO 80265</b>  6/24/2004 5:19 PM Code: EPNG Com C 100T		<b>B. Received by (Printed Name)</b>	<b>C. Date of Delivery</b> 6/30/04
		<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
		<b>3. Service Type</b>	<input checked="" type="checkbox"/> <b>Certified</b>
		<b>4. Restricted Delivery? (Extra Fee)</b>	<input type="checkbox"/> Yes
PS Form 3811 Domestic Return Receipt			