ubmit 3 Copies To Appropriate District  State of New Mexico  Financial Minerals and Network Resources				Form C-103 Jun 19, 2008	
District I Energy 1625 N French Dr , Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.		
District II	OIL CONSERVATION DIVISION		30-039-30662		
1501 W Grand Ave, Artesia, Will 66210	1220 South St. Francis Dr.		5. Indicate Type of Lease		
1000 Rio Brazos Rd, Aztec, NM 87410	Santa Fe, NM 87505		STATE FEE 6. State Oil & Gas Lease No.		
District IV 1220 S St. Francis Dr , Santa Fe, NM 87505	·				
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)			7. Lease Name or Unit Agreement Name San Juan 30-5 Unit Com		
1. Type of Well: Oil Well Gas Well Other			8. Well Number 1N		
2. Name of Operator			9. OGRID Number		
Burlington Resources Oil Gas Company LP			14538		
3. Address of Operator P.O. Box 4289, Farmington, NM 87499-4289			10. Pool name or Wildcat  Blanco MV / Basin DK		
4. Well Location					
Unit Letter O: 670 feet from the South line and 1900 feet from the East line					
Section 4 Townsh				io Arriba County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6417' GR					
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WO			ORK ☐ ALTERING CASING ☐ I		
			LLING OPNS.	PANDA 🗆	
PULL OR ALTER CASING  MULTIPLE COMPL  CASING/CEMENT JOB				]	
DOWNHOLE COMMINGLE					
OTHER: ☐ APD Extension OTHER: ☐					
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.					
Burlington Resources would like to request an APD extension for subject well.					
	1	<b>J</b>		RCVD MAY 27 '11	
				FIFE ACTAIN TATE	
APD ExPiled 2-	-7-2011 Re	SUBMIT WITH	SHEMENT		
Spud Date:	Rig Rele	ased Date:		DIST. 3	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
5/2/4					
SIGNATURE SIGNATURE	usse_TITLE_	Staff Regulatory	Technician I	DATE <u>5/26/</u> 11	
Type or print name Dollie L. Busse E-mail address: dollie.l.busse@conocophillips.com PHONE: 505-324-6104					
For State Use Only				11 lb 1 'a = 00.44	
APPROVED BY: ( Should Have	TITLE	SUPERVISOR DI	STRICT #3	JUN 0 5 2011	
Conditions of Approval (if any):	11100	war Pilita dagan P			



