

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N French Dr, Hobbs, NM 88240  
District II  
1301 W Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd, Aztec, NM 87410  
District IV  
1220 S St Francis Dr, Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
June 16, 2008

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 )		WELL API NO. <b>30-045-35291</b>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>BURLINGTON RESOURCES OIL &amp; GAS COMPANY LP</b>		6. State Oil & Gas Lease No. <b>B-1680-88</b>
3. Address of Operator <b>P.O. BOX 4289, FARMINGTON NM 87499</b>		7. Lease Name or Unit Agreement Name <b>HUERFANO UNIT COM</b>
4. Well Location Unit Letter <b>I</b> : <b>2195'</b> feet from the <b>FSL</b> line and <b>675'</b> feet from the <b>FEL</b> line Section <b>02</b> Township <b>025N</b> Range <b>009W</b> NMPM <b>SAN JUAN</b> County <b>NM</b>		8. Well Number <b>311</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>6491' GR</b>		9. OGRID Number <b>14538</b>
		10. Pool name or Wildcat <b>DUFERS POINT-GALLUP DAKOTA / BASIN DAKOTA</b>

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <b>FIRST-DELIVERY</b>	<b>07/20/12</b> <input checked="" type="checkbox"/>

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.

This well is a new drill and was first-delivered on **07/20/12** and produced natural gas and entrained hydrocarbons of **2192 MCF**.  
THIS WELL WAS DELIVERED THROUGH GAS RECOVERY COMPLETION. STARTED SELLING ON THE GL & DK 07/20/12.  
FINISHED THE GAS RECOVERY COMPLETION 07/27/12.

TP: N/A CP: N/A Initial MCF: 2192

Meter No.: 91038

Gas Co.: EFS

RCVD AUG 9 '12  
OIL CONS. DIV.  
DIST. 3

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

SIGNATURE Tamra Sessions TITLE Staff Regulatory Tech DATE 08/07/12

Type or print name Tamra Sessions E-mail address: tamra.d.sessions@ConocoPhillips.com PHONE: 505-326-9834

**For State Use Only**

**ACCEPTED FOR RECORD**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE **AUG 09 2012**

Conditions of Approval (if any):

Ca