

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

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

Form C-103  
March 4, 2004

<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. 30-045-32932
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator <b>Burlington Resources Oil &amp; Gas Company LP</b>		6. State Oil & Gas Lease No.
3. Address of Operator <b>P.O. Box 4289, Farmington, NM 87499-4289</b>		7. Lease Name or Unit Agreement Name Fuller
4. Well Location Unit Letter <u>D</u> : <u>830</u> feet from the <u>North</u> line and <u>975</u> feet from the <u>West</u> line Section <u>22</u> Township <u>30N</u> Range <u>11W</u> NMPM Rio Arriba County		8. Well Number #2S
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 14538
		10. Pool name or Wildcat Basin Fruitland Coal - 71599

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"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input 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.

8/8/05 MIRU Bearcat #4. NUBOP. PT casing @600# 30 min ok. RIH w/6 1/4" bit & tagged cmt @138'. 8/9/05 D/O cmt & ahead to 2380'. Circulate hole. 8/9/05 RIH w/55 jts of 4 1/2" 10.5# J55 ST&C csg set @ 2375'. Pumped preflush of 10bbls H2O, 10bbls mud, 10bbls H2O. Pumpedw/19sxs(57cu-10bbls)scavenger cement w/.05pps Cell-o-Flake, .3% CD32, 6.25pps LCM1, 1% FL52. Cemented lead w/157sxs (334cu-60bbls)prem lite w/.25pps Cell-o-Flake, .3% CD32, 6.25pps LCM1, 1% FL52. Tail in w/90sxs(124cu-22bbls)Type 3 cmt w/ .25% Cell-o-Flake, 1% CaCl2, .2% FL52. Plug down @ 0723 hrs. Circulated 37bbls of cmt. ND RD Rig released 0130 hrs 8/10/05. Will show top of cement & casing PT on next report. PT will be conducted by completing rig.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Amanda Sandoval TITLE Regulatory Assistant II DATE 8/10/05  
Type or print name Amanda Sandoval E-mail address: asandoval@br-inc.com Telephone No. 505-326-9700

(This space for State use)

APPROVED BY Charles H. [Signature] TITLE SUPERVISOR DISTRICT # 3 DATE AUG 10 2005  
Conditions of approval, if any: