

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
 Jun 19, 2008

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

WELL API NO. 30-045-30359
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Farmington A
8. Well Number 100
9. OGRID Number 14538
10. Pool name or Wildcat Basin FC

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.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
Burlington Resources Oil Gas Company LP

3. Address of Operator
P.O. Box 4289, Farmington, NM 87499-4289

4. Well Location
 Unit Letter **P** : **660** feet from the **South** line and **705** feet from the **East** line
 Section **1** Township **29N** Range **13W** NMPM **San Juan** County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
5362' GR

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

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/></p> <p>OTHER: MIT TEST <input checked="" type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>
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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 intends to perform an MIT test on subject well as per the NMOCD regulations requiring MIT every 5 years. The last MIT was performed 1/21/2009. Procedure is attached.

RCVD DEC 31 '13
 OIL CONS. DIV.
 DIST. 3

Notify NMOCD 24 hrs
 prior to beginning
 operations

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

SIGNATURE Denise Journey TITLE Regulatory Technician DATE 12/23/13

Type or print name Denise Journey E-mail address: Denise.Journey@conocophillips.com PHONE: 505-326-9556

For State Use Only

APPROVED BY: Bob Roll TITLE Deputy Oil & Gas Inspector,
 Conditions of Approval (if any): AV District #3 DATE 1-2-14

(Handwritten mark)

ConocoPhillips
FARMINGTON A 100
Expense - MIT

Lat 36° 44' 59.352" N

Long 108° 9' 1.008" W

PROCEDURE

1. Hold pre-job safety meeting. Comply with all NMOCD, BLM, and COPC safety and environmental regulations.
2. MIRU pressure testing truck. Check casing and bradenhead pressures and record them in Wellview. **If there is pressure on the BH, contact Wells Engineer.**
3. Connect the pressure testing truck to the casing. Verify that casing is filled with proper fluid.
4. **Notify necessary regulatory agencies 24 hours prior to MIT.** MIT the casing to 560 psi for 30 minutes on a 2 hour chart with 1000# spring. Record pressure test in Wellview and notify engineer and superintendent of the results. Bring the chart to the Wells Engineer.
5. RD and release test unit.