

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South 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.)		WELL API NO. 30-45-22326
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 BURLINGTON RESOURCES OIL & GAS COMPANY, LP		6. State Oil & Gas Lease No.
3. Address of Operator P O BOX 4289, Farmington, NM 87499-4289		7. Lease Name or Unit Agreement Name Culpepper Martin
4. Well Location Unit Letter D : 990' feet from the NORTH line and 990' feet from the WEST line Section 32 Township 32N Range 12W NMPM County San Juan		8. Well Number 10A
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5872'		9. OGRID Number 14538
		10. Pool name or Wildcat Blanco Mesaverde

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

NOTICE OF INTENTION TO: 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"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: 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"/> OTHER: RE-DELIVERY <input checked="" type="checkbox"/>	
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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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

This well was Re-Delivered on 1/7/14 and produced an initial MCF of 24. The well was shut in for more than 90 days for Downhole Issues.

TP: 145

CP: 145

INITIAL MCF: 24

METER NO: 34503

GAS CO: WILLIAMS

PROJ. TYPE: RE-DELIVERY

RCVD JAN 28 '14
 OIL CONS. DIV.
 DIST. 3

Spud Date:

Rig Release Date:

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 1/24/14

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

APPROVED BY: ACCEPTED FOR RECORD TITLE AV DATE FEB 13 2014
 Conditions of Approval (if any):