Submit 3 Copies To Appropriate District Office	State of New Mexico				Form C-103
District 1	Energy, Minerals and Natural Resources			Jun 19, 2008	
1625 N. French Dr., Hobbs, NM 88240				WELL API NO	
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION				30-045-35371
District III	1220 South St. Francis Dr.			5. Indicate Tyl STATE	·
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505				Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	2			o. State Off &	NM-01614
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 Thompson	
1. Type of Well: Oil Well	Gas Well 🛛 Other			8. Well Number 8N	
2. Name of Operator				9. OGRID Number	
Burlington Resources Oil Gas Company LP				14538	
3. Address of Operator				10. Pool name	
P.O. Box 4289, Farmington, NM 87499-4289				Bland	co MV / Basin DK
4. Well Location				<u></u>	
Unit Letter F : 191	feet from the	North	line and209	5feet from	the <u>West</u> line
Section 28	Township 31N		ange 12W		San Juan County
rg	11. Elevation (Show w				
<b>一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个</b>		6133			······································
12. Check A	Appropriate Box to I	ndicate N	ature of Notice,	Report or Oth	er Data
				_	
NOTICE OF IN		—	1	SEQUENT R	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR					ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRI		P AND A
PULL OR ALTER CASING	MULTIPLE COMPL		CASING/CEMENT	rjob 📙	
DOWNHOLE COMMINGLE					
OTHER: X REINSTATE DHC A	PPROVAL		OTHER:		
13. Describe proposed or comp	leted operations. (Clear	ly state all r		d give pertinent d	ates, including estimated dat
of starting any proposed wo	ork). SEE RULE 1103.	For Multip	le Completions: Att	tach wellbore dia	gram of proposed completion
or recompletion.					
To our knowledge nothing Burlington Resources reque reinstating the APD approv	ests that the NMOCD rei			e approval – <b>DH</b>	
	~			Oll	CONS. DIA DIA
S. 15.4		Dia Dala	and Data.	- QIE	JUN 2 4 2014
Spud Date:		Kig Kele	ased Date:		
					**
I hereby certify that the information	above is true and compl	ete to the be	est of my knowledge	e and belief.	
SIGNATURE Aller	Busse	_TITLE	Staff Regulatory	Technician D	ate <u>6/23/</u> /4
Type or print name Dollie L. Buss	se E-mail address:	ا مزاله ا	husse@canacanhil	lins.com PHO	NE: 505-324-6104
For State Use Only	. D-man address.		Deputy Oil & G		
	11		Distric		7/10/11
APPROVED BY: USU	18m	_TITLE	ם ווופות	J. 77 U	DATE 7/18/14
Conditions of Approval (if any):	, —	PV			·