

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. <b>30-045-35187</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. FEE
7. Lease Name or Unit Agreement Name <b>Hudson</b>
8. Well Number <b>5M</b>
9. OGRID Number <b>14538</b>
10. Pool name or Wildcat <b>Blanco MV / Basin DK</b>

**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 **C** : **893** feet from the **North** line and **1587** feet from the **West** line  
 Section **17** Township **31N** Range **10W** NMPM **San Juan** County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
 6010' GR

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

<p><b>NOTICE OF INTENTION TO:</b></p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/></p> <p>DOWNHOLE COMMINGLE <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p><b>SUBSEQUENT REPORT OF:</b></p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/></p> <p>CASING/CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <input checked="" type="checkbox"/> <b>FIRST-DELIVERY 11/11/14</b></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.

This well was first delivered on 11/11/14 and produced natural gas and entrained hydrocarbons of 805 MCF.

**NOTE:** THIS WELL WAS DELIVERED THROUGH THE GAS RECOVERY COMPLETION. STARTED SELLING GAS ON THE MV 11/11/14, MV & DK FLOWING TOGETHER ON 11/13/14. FINISHED THE GAS RECOVERY COMPLETION 11/15/14.

TP: N/A CP: N/A Initial MCF: 805  
 Meter No.: 91-130 Gas Co.: Enterprise

**OIL CONS. DIV DIST. 3**  
**DEC 02 2014**

Spud Date:  Rig Released Date:

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

SIGNATURE Dollie L. Busse TITLE Staff Regulatory Technician DATE 11-25-14

Type or print name Dollie L. Busse E-mail address: dollie.l.busse@conocophillips.com PHONE: 505-324-6104

**For State Use Only**

APPROVED BY: ACCEPTED FOR RECORD TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of Approval (if any): AV