

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>30-045-35141</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>Vasaly Com</b>
8. Well Number <b>1N</b>
9. OGRID Number <b>14538</b>
10. Pool name or Wildcat <b>Blanco Mesaverde / Basin Dakota</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 **B** : **686** feet from the **North** line and **2203** feet from the **East** line  
Section **22** Township **30N** Range **11W** NMPM **San Juan County**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
5835' GR

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"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input checked="" type="checkbox"/> tubing repair	

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.

4/14/15 RU S/L. RIH & tagged 6721'. RD S/L

5/4/15 MIRU DWS 29. ND WH. NU BOP- PT-OK. TOH w/tubing inspecting. TIH & C/O fill w/air-mist. 5/7/15 RIH w/tubing & set. ND BOP, NU WH. Test tubing and tried to pump off check. Check plugged. 5/8/15 Had to perf tubing. ND WH, NU BOP PT - OK. TOH w/tubing. Found ball seated in check w/3' of fill on top. 5/11/15 RIH w/2-3/8" and c/o fill w/air-mist and foamer and corrosion inhibitor. 5/12/15 Landed 218 jts 2-3/8" 4.7#, J-55 tubing @ 6780' (new setting depth) w/FN @ 6779'. ND BOP, NU WH. Ran more foam and inhibitor down tbg. PT tubing - OK. Pumped off check. RD & released rig @ 1500 hrs 5/12/15.

OIL CONS. DIV DIST. 3

MAY 20 2015

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 Patsy Clugston TITLE Staff Regulatory Technician DATE 5/14/15

Type or print name Patsy Clugston E-mail address: Patsy.L.Clugston@conocophillips.com PHONE: 505-326-9518

For State Use Only

APPROVED BY: [Signature] TITLE DEPUTY OIL & GAS INSPECTOR DATE 5-21-15  
Conditions of Approval (if any): AV