	Carlo
Submit 3 Copies To Appropriate District State of New Mexico	/Form C-103
Office District I Energy, Minerals and Natural Re	esources Revised May 08, 2003
1625 N. French Dr., Hobbs, NM 88240 District II	WELL API NO. 30-045-23647
1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIV	1510N 5 Indicate Type of Lease
District III 1220 South St. Francis I 1000 Rio Brazos Rd., Aztec, NM 87410 Sonto Fo. NIM 87505	or. STATE □ FEE □
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OF PROPOSALS) DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM CO) INFORMATION FOR PERMIT (FORM CO)	Harper
PROPOSALS.) 1. Type of Well:	8. Well Number
Oil Well Gas Well Other JUN 200	3 = 2E
2. Name of Operator Burlington Resources Oil & Gas Company LP	9. OGRID Number 14538
3. Address of Operator C Dist. 3	10. Pool name or Wildcat
PO Box 4289, Farmington, NM 87499	Basin Dakota
4. Well Location	
Unit Letter H : 1780 feet from the North	_ line and930feet from theEastline
	ge 12W NMPM San Juan County
11. Elevation (Show whether DR, RKB, 6229' GR	RT, GR, etc.)
12. Check Appropriate Box to Indicate Nature	of Notice, Report or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REM	IEDIAL WORK ☐ ALTERING CASING ☐
TEMPORARILY ABANDON	MENCE DRILLING OPNS.☐ PLUG AND ☐ ABANDONMENT
	ING TEST AND
	ER: 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.	
6/2/03 MIRU. ND WH. NU BOP. TOOH w/2-3/8" tbg. SDON.	
6/3/03 TIH w/mill, tag @ 7521'. Circ hole clean @ 7521-7547'. Blow well clean. TOOH w/mill. SDON.	
6/4/03 TIH w/241 jts 2-3/8" 4.7# J-55 tbg, set @ 7528'. ND BOP. NU WH. RD. Rig released.	
I hereby certify that the information above is true and complete to the best of n	ny knowledge and helief
Search Man	
SIGNATURE SIGNATURE TITLE Regula	atory SupervisorDATE
Type or print name Peggy Cole	Telephone No. (505) 326-9700
(This space for State use)	LE GAS INSPECTOR DISTURD JUN 12 2003
APPPROVED BY Child Kar TITLE Conditions of approval, if any:	L & GAS INSPECTOR, DIST. (2) DATE
Conditions of approval, it ally.	