Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Re	sources Revised July 18, 2013 WELL API NO.
District II - (575) 748-1283	OIL CONSERVATION DIV	SION 30-039-27333
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178	1220 South St. Francis D	5 Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		B-10037-58
(DO NOT USE THIS FORM FOR PROPODIFFERENT RESERVOIR. USE "APPL	TICES AND REPORTS ON WELLS DSALS TO DRILL OR TO DEEPEN OR PLUG BAC ICATION FOR PERMIT" (FORM C-101) FOR SUC	
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well 🛛 Other	8. Well Number 190
2. Name of Operator Burlington Resources Oil & Gas Company		9. OGRID Number 14538
3. Address of Operator P.O. Box	4289, Farmington, NM 87499	10. Pool name or Wildcat Basin FC / Blanco PC
4. Well Location		
Unit Letter I : 1835 feet from the South line and 1170 feet from the East line		
Section 16	Township 029N Range 11. Elevation (Show whether DR, RKB,	007W NMPM Rio Arriba County
6258'		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF II PERFORM REMEDIAL WORK □	NTENTION TO:	SUBSEQUENT REPORT OF: EDIAL WORK
TEMPORARILY ABANDON	CHANGE PLANS COM	IMENCE DRILLING OPNS. ☐ P AND A ☐
PULL OR ALTER CASING		ING/CEMENT JOB
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM		
OTHER:	OTH	
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 wall was about in factors and then 00 days due to equipment issue. Deturned to another an 2/10/2017		
This well was shut in for more than 90 days due to equipment issue. Returned to production on 3/10/2017		
TP: 138 CP:	138 Initial MCF: 38	Olt o
11: 136 CF:	136 Initial MCF: 36	OIL CONS. DIV DIST O
Meter No.: 98788	Gas Co.: ENTERPRISE	MAP 2 2 00
Project Type: REDELIV	VERY	OIL CONS. DIV DIST. 3 MAR 2 3 2017
Spud Date:	Rig Release Date:	
Space Date.		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE Julie Designation DATE 3/22/2017		
SIGNATURE Regulatory reclinician DATE 5/22/2017		
Type or print name <u>Dollie L. Busse</u> E-mail address: <u>dollie.l.busse@conocophillips.com</u> PHONE: <u>505-324-6104</u> For State Use Only		
APPROVED BY Conditions of Approval (if any):	TITLE PY	DATE