Submit 1 Copy To Appropriate District State of New Mexico Form C-103 Office Revised July 18, 2013 Energy, Minerals and Natural Resources District I - (575) 393-6161 WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 District II - (575) 748-1283 30-045-11059 OIL CONSERVATION DIVISION 811 S. First St., Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III - (505) 334-6178 STATE 🖂 **FEE** 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 6. State Oil & Gas Lease No. District IV - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM E-3150-1-NM 87505 7. Lease Name or Unit Agreement Name 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 San Juan 32-9 Unit PROPOSALS.) 8. Well Number 57 1. Type of Well: Oil Well ☐ Gas Well ☒ Other 2. Name of Operator Burlington Resources Oil & Gas Company LP 9. OGRID Number 14538 10. Pool name or Wildcat 3. Address of Operator P.O. Box 4289, Farmington, NM 87499 Blanco MV 4. Well Location line and 800 feet from the East Unit Letter H: 2070 feet from the North Section 31N Range 09W **NMPM** County San Juan Township 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6476 GL 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 REMEDIAL WORK ALTERING CASING □ TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS.□ P AND A PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: RE-DELIVERY OTHER: 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 well was shut in for more than 90 days due to the pipeline being shut in. Returned to production on 3/15/17. TP: 120 CP: 120 Initial MCF: 18 OIL CONS. DIV DIST. 3 Gas Co.: ENT Meter No.: 72-240-1 Project Type: REDELIVERY APR 1 4 2017 Spud Date: Rig Release Date: I hereby certify that the information above is true and complete to the best of my knowledge and belief. 70 MADOK TITLE_Regulatory Specialist_ Type or print name <u>Christine Brock</u> E-mail address: <u>christine.brock@cop.com</u> PHONE: <u>505-326-9775</u> For State Use Only APPROVED BY: Qccapted for Record TITLE

Conditions of Approval (if any):