Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103	
District I	Energy, Minerals and Natural Resources		WELL API NO.	
1625 N. French Dr., Hobbs, NM 88240 District II	OIL CONSERVAT	TION DIVISION	30-045-331 20	
1301 W. Grand Ave., Artesia, NM 88210 District III			5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr. Santa Fe, NM 87505		STATE X FEE UIS 3	
District IV 1220 S. St. Francis Dr., Santa Fe, NM	Suitta 1 0, 1 v	111 07000	o. State Off & Gas Lease No.	
87505 SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name	
(DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVOIR. USE "APPLIC	SALS TO DRILL OR TO DEEPEN	OR PLUG BACK TO A	CULPEPPER MARTIN	
1. Type of Well: Oil Well	Gas Well X Other		OD	
2. Name of Operator Burlington Resources Oil & Gas			9. OGRID Number 14538	
3. Address of Operator PO BOX 4289			10. Pool name or Wildcat	
Farmington, NM 87401 4. Well Location		Blanco Mesaverde/Basin Dakota		
Section 19	Township 32N			
機能能能認為經濟學學的學術。				
Pit or Below-grade Tank Application O	r Closure 🔲			
Pit Liner Thickness: mil Below-Grade Tank: Volumebbls; Construction Material				
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 ☐				
PROPOSALS.) 1. Type of Well: Oil Well				
PULL OR ALTER CASING	MULTIPLE COMPL L	CASING/CEMENT	T JOB 📙	
		OTHER:PT and lo	og detail X	
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion				
•				
11/24/06 Run GR/CCL/CBL from 6964 to surface. 10C @ 3480 (/* csg set @ 4020 - good overlap).				
11/24/06 PT 4 1/2" csg to 4100#/15 min. Good test.				
11/24/06 Run GR/CCL/CBL from 6964' to surface. TOC @ 3480' (7" csg set @ 4020' - good overlap).				
Thombs outiful that the information	-1	4-1-4-6-1-1	11.11.6.70	
grade tank has been/will be constructed or	above is true and complete to closed according to NMOCD guid	elines , a general permit	e and belief. I further certify that any pit or below- or an (attached) alternative OCD-approved plan .	
SIGNATURE Jugut Ja		LE Regulatory Specialist	DATE 01/16/2007	
Type or print name Juanita Farrell	E-r	nail address:	Telephone No. (505)326-9597	
For State Use Only			USPECTOR, DIST. (PA	
APPROVED BY: H. Villa	nueva TIT		DATE \\\ 25\07	
Conditions of Approval (if any):				
			8	