Submit 3 Copies To Appropriate District Office <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u>	State of New Mexico Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION			Form C-103 June 16, 2008 WELL API NO. 3004534574	
1301 W. Grand Ave, Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr. Santa Fe, NM 87505			5. Indicate Type of STATE 5. State Oil & Gas	FEE _
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	Sunta 1 0, 14141 07303			OG-1649-1	Lease No.
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.)				7. Lease Name or Unit Agreement Name FARMINGTON COM	
1. Type of Well: Oil Well Gas Well Other				8. Well Number 100	
2. Name of Operator BURLINGTON RESOURCES OIL & GAS COMPANY LP				9. OGRID Number 14538	
3. Address of Operator				10. Pool name or Wildcat	
P.O. BOX 4289, FARMINGTON NM 87499				BASIN FRUITLAND COAL	
4. Well Location Unit Letter L:	2245' feet from the	FSL.	line and 10-	40' feet from t	the FWL line
Section 36	Township		Range 013		SAN JUAN County
	11. Elevation (Show 6107' GL	whether DR, I	RKB, RT, GR, etc.)	Ž.	
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 WOR					
TEMPORARILY ABANDON					P AND A
OTHER:			OTHER:	FIRST-DELIVERY	07/30/08
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.					
This well was first-delivered on <u>07/30/08</u> and produced natural gas and entrained hydrocarbons of <u>210</u> MCF.					
TP: 0 CP: 359 Initial N	ICF: 210				CVD AUG 1 '08) <u>IL</u> CONS. DIV.
Meter No.: 88524			t		DIST. 3
Gas Co.: EFS					
		1			
I hereby certify that the information	above is true and comp	olete to the bes	st of my knowledge	e and belief.	
SIGNATURE MALE	MMW TI	ITLEReg	ulatory Tech	DAT	E07/30/08
Type or print name Marie E. Jara For State Use Only	millo E-mail a	address: marie	e.e.jaramillo@Con	ocoPhillips.com PF	HONE:505-326-9865
	MAORAS TI	TLE		DA	TF
APPROVED BY: (Conditions of Approval (if any):	B				