Submit 3 Copies To Appropriate District Office	State of New Me		Form C-103	
District I	Energy, Minerals and Natural Resources		June 16, 2008 WELL API NO.	
1625 N. French Dr., Hobbs, NM 88240 District II		BHWAYAY	3003924811	
1301 W Grand Ave., Artesia, NM 88210			5. Indicate Type of Lease	
District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410			STATE  FEE	
District IV Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM		7505	6. State Oil & Gas Lease No. FEE	
87505				
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 SAN JUAN 29-7 UNIT NP	
1. Type of Well: Oil Well Gas Well Other		8. Well Number 260		
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 G: 1640' feet from the FNL line and 1645' feet from the FEL line				
Section 23 Township 029N Range 007W NMPM RIO ARRIBA County				
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
10 PM	· ·	, , , ,		a.
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
				ALTERING CASING
TEMPORARILY ABANDON				
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB				
	_			_
OTHER:		OTHER:	RE-DELIVERY	07/08/08
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.				
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This well was re-delivered after being turned off for more than 90 days on <u>07/08/08</u> produced an initial MCF of <u>55</u> .				
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TP: 180 CP: 180	Initial MCF: 55			
Meter No.: 61016			R	CVD AUG 13 '08
Meter No.: Oroto			r	IL CONS. DIŲ.
Gas Co.: EFS			·	NE CONO. DIA.
				DIST. 3
	/			
I hereby certify that the information above is true and/complete to the best of my knowledge and belief.				
11 on 4 Ar and 1 h				
SIGNATURE	N/M/M	emulatory Tech	, DAT	ΓE 08/11/08
SIGNATURE DATE 08/11/08				
Type or print name Marie E. Jaramillo E-mail address: marie.e.jaramillo@ConocoPhillips.com PHONE:505-326-9865				
For State Use Only				
APPROVED BY: accepted	A -		DA	ATE
Conditions of Approval (if any):	0 86			