

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N French Dr., Hobbs, NM 88240  
District II  
1301 W Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S St Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
June 16, 2008

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. <b>3004533010</b>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator <b>BURLINGTON RESOURCES OIL &amp; GAS COMPANY LP</b>		6. State Oil & Gas Lease No. <b>FEE</b>
3. Address of Operator <b>P.O. BOX 4289, FARMINGTON NM 87499</b>		7. Lease Name or Unit Agreement Name <b>SAMMONS</b>
4. Well Location Unit Letter <b>O</b> : <b>490'</b> feet from the <b>FSL</b> line and <b>1465'</b> feet from the <b>FEL</b> line Section <b>32</b> Township <b>030N</b> Range <b>012W</b> NMPM <b>SAN JUAN</b> County <b>NM</b>		8. Well Number <b>100S</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc ) <b>GR</b>		9. OGRID Number <b>14538</b>
		10. Pool name or Wildcat <b>basin FRUITLAND COAL</b>

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <b>RE-DELIVERY</b>	<b>10/06/08</b> <input checked="" type="checkbox"/>

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 re-delivered after being turned off for more than 90 days on 10/06/08 produced an initial MCF of 227.

TP: N/A CP: 56 Initial MCF: 227  
Meter No.: 36650  
Gas Co.: WFS

RCVD OCT 15 '08  
OIL CONS. DIV.  
DIST. 3

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Marie E. Jaramillo TITLE Regulatory Tech DATE 10/06/08

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 for record TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval (if any): by