

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

WELL API NO. <b>3004528780</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>E-1193-8</b>
7. Lease Name or Unit Agreement Name <b>EPNG COM D</b>
8. Well Number <b>301</b>
9. OGRID Number <b>14538</b>
10. Pool name or Wildcat <b>BASIN FRUITLAND COAL</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>' GR</b>

**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.)

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator  
**BURLINGTON RESOURCES OIL & GAS COMPANY LP**

3. Address of Operator  
**P.O. BOX 4289, FARMINGTON NM 87499**

4. Well Location  
 Unit Letter **D** : **1175'** feet from the **FNL** line and **1115'** feet from the **FWL** line  
 Section **36** Township **030N** Range **008W** NMPM **SAN JUAN** County **NM**

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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>12/08/08</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 12/08/08 produced an initial MCF of 199.

TP: RODS CP: 160 Initial MCF: 199  
 Meter No.: DUK20606  
 Gas Co.: TEPPCO

RCVD JAN 9 '09  
 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 01/07/08

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):