

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>3004506456</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>E-1010-NM</b>
7. Lease Name or Unit Agreement Name <b>TURNER B COM C</b>
8. Well Number <b>8</b>
9. OGRID Number <b>14538</b>
10. Pool name or Wildcat <b>FULCHER KUTZ PICTURED CLIFFS</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>6322 ' 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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other
2. Name of Operator <b>BURLINGTON RESOURCES OIL &amp; GAS COMPANY LP</b>
3. Address of Operator <b>P.O. BOX 4289, FARMINGTON NM 87499</b>
4. Well Location Unit Letter <b>P</b> : <b>990'</b> feet from the <b>FSL</b> line and <b>990'</b> feet from the <b>FEL</b> line Section <b>16</b> Township <b>027N</b> Range <b>009W</b> NMPM <b>SAN JUAN</b> County <b>NM</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>6322 ' GR</b>

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: **RE-DELIVERY 02/19/09** ☒

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 **02/19/09** produced an initial MCF of **57**.

TP: 157 CP: 157 Initial MCF: 57

Meter No.: 71362

Gas Co.: EFS

Project Type: REDELIVER

RCVD MAR 6 '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 03/05/09

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): B