

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>3003920477</b>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>BURLINGTON RESOURCES OIL &amp; GAS COMPANY LP</b>		6. State Oil & Gas Lease No. <b>E-290-28</b>
3. Address of Operator <b>P.O. BOX 4289, FARMINGTON NM 87499</b>		7. Lease Name or Unit Agreement Name <b>SAN JUAN 28-6 UNIT</b>
4. Well Location Unit Letter <b>M</b> : <b>1180</b> feet from the <b>FSL</b> line and <b>1150'</b> feet from the <b>FWL</b> line Section <b>02</b> Township <b>027N</b> Range <b>006W</b> NMPM <b>RIO ARRIBA</b> County <b>NM</b>		8. Well Number <b>169</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>6485' GR</b>		9. OGRID Number <b>14538</b>
		10. Pool name or Wildcat <b>BASIN DAKOTA</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>02/18/10</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 shut in due to logging off. It was re-delivered on **02/18/10** produced an initial MCF of **70**.

TP: 320 CP: 320 Initial MCF: 70

Meter No.: 87445

Gas Co.: WFS

Project Type: REDELIVERY

RCVD MAR 3 '10

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 Tamra Sessions TITLE Staff Regulatory Tech DATE 03/02/10

Type or print name Tamra Sessions E-mail address: tamra.d.sessions@ConocoPhillips.com PHONE: 505-326-9834  
For State Use Only

APPROVED BY: accepted for record TITLE  DATE 3/3/10  
Conditions of Approval (if any): B