Submit 3 Copies To Appropriate District Office District I State of New Mexico Energy, Minerals and Natural Resources	Form C-103 June 16, 2008
1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION	WELL API NO. 3004529747
District III 1000 Rio Brazos Rd. Azton NM 87410	5. Indicate Type of Lease STATE ☐ FEE ☒
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	6. State Oil & Gas Lease No. FEE
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 BRUINGTON LS
1. Type of Well: Oil Well Gas Well Other	8. Well Number 4R
2. Name of Operator CONOCOPHILLIPS COMPANY	9. OGRID Number 217817
3. Address of Operator P.O. BOX 4289, FARMINGTON NM 87499	10. Pool name or Wildcat DK/ MV BASIN DAKOTA / BLANCO MESAVERDE
4. Well Location	
Unit Letter M: 790' feet from the FSL line and 925' feet from the FWL line Section 06 Township 030N Range 011W NMPM County SAN JUAN	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
5715' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WO	_
TEMPORARILY ABANDON	RILLING OPNS.□ PAND A □ NT JOB □
	_
OTHER:	
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 drilling the Bruinton LS 4P and returned back to producation on <u>03/04/10</u> produced an initial MCF of <u>767</u> .	
TD 070 CD 070 Y 11 12 CD 707	
TP: 853	
Meter No.: 98322	RCVD MAY 14'10
Gas Co.: ENT PROJECT TYPE: REDELIVERY	OIL CONS. DIV.
I KOJECI TITE. REDELIVERT	DIST. 3
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
Thereby certify that the information above is que and complete to the best of my knowled	ge and benef.
SIGNATURE TITLE Staff Regulatory	TechDATE05/10/10
Type or print nameMarie 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): U	