State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

District Office	<i>by</i> ,		resources Department			Revised 1-1-	39 CJC
DISTRICT I P.O. Box 1980, Hobbs NM 88240	OIL CONSERVA	TIC	ON DIVISION	WELL A	DI NO		
DISTRICT II	P.O. Box 2088 Santa Fe, New Mexico 87504-2088			30~	015-2	22747	
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III				5. Indicate Type of Lease STATE X FEE			
1000 Rio Brazos Rd., Aztec, NM 87410				6. State	Oil & G	as Lease No.	EE
SUNDRY NOTIC	ES AND REPORTS ON V	WELL	S		7////		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"				7. Lease Name or Unit Agreement Name			
1. Type of Well:	-101) FOR SUCH PROPOSAL	.S.) ———			e 14		
OIL GAS WELL X	OTHER						
Name of Operator Burlington Resources Oil & G	as Company			8. Well I	No.		
3. Address of Operator				# 1 9. Pool name or Wildcat			
P.O. 51310, Midland, TX 79 4. Well Location	710-1810			Turk	ey Tı	rack Morrow/Atoka	
Unit Letter: 1980'	Feet From The North		Line and	1	Feet Fre	om The West	Line
Section 14	Township 19S	Ra	ange 29E	имем Е			
	10. Elevation (Show	wheth	er DF, RKB, RT, GR, etc	:.)	<u></u>		County
11. Check App	propriate Box to Indi	cate	Nature of Notice.	Report			
NOTICE OF IN	TENTION TO:					REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WORK			ALTERING CASING	_
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLING	OPNS		PLUG AND ABANDONME	
PULL OR ALTER CASING			CASING TEST AND CE		ÜП	FEOG AND ABANDONMI	:N1 L
OTHER:		П	OTHER: Status Upo				X
12. Describe Proposed or Completed Opera work) SEE RULE 1103.	ations (Clearly state all nertin	ent dets					
							roposed
This well is a dual completion however, the morrow is prese 1994.	in the Morrow and Ato ently producing.	ka zo	ones. The Atoka zo	one is s	hut in		
					1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
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						0CT 2 3 1995	
						The Market State of the State o	
I hereby certify that the information above is true	and complete to the best of my kn-	owledge	and helief.	 ;			
SIGNATURE		TITL	E Regulatory Compli	iance		DATE _10/18/96	
TYPE OR PRINT NAME Donna Williams						TELEPHONE NO. 915-688-	-6943
(This space for State Use)							
ORIGINAL SIGNED							
APPROVED BY DISTRICT I! SUPER CONDITIONS OF APPROVAL, IF ANY:	VISOR	_ TITLI	E			DATE	96