to Appropriate District Office	Energy, Minerals and Na	atural Resources Departr	nent	Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO.	
DISTRICT II				30-015-22625
P.O. Drawer DD, Artesia, NM 88210		Mexico 07504 2000	5. Indicate Type of I	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410)		6. State Oil & Gas L	
SUNDRY NOTI	ICES AND REPORTS ON	WELLS		
(DO NOT USE THIS FORM FOR PRO DIFFERENT RESEI (FORM	POSALS TO DRILL OR TO DE RVOIR. USE "APPLICATION F C-101) FOR SUCH PROPOSA	OR PERMIT"	7. Lease Name or U State 19 Cor	6
1. Type of Well: OIL GAS WELL WELL	OTHER	<u> </u>		n.
2. Name of Operator Burlington Resources Oil &	Gas Company		8. Well No. # 2	······································
3. Address of Operator P.O. 51310, Midland, TX 7	79710-1810		9. Pool name or Wil South Millma	
4. Well Location Unit Letter: 860'	Feet From The South	Line and 20	57' Feet From 1	he West Line
Section 19	Township 19S	Range 28E	NMPM Eddy	County
	10. Elevation (Sho	w whether DF, RKB, RT, G	R, etc.)	
^{11.} Check A	ppropriate Box to Inc	licate Nature of Not	tice, Report, or Ot	her Data
	NTENTION TO:	1	SUBSEQUENT F	
	PLUG AND ABANDON		< Па	TERING CASING
	CHANGE PLANS			UG AND ABANDONMENT
		CASING TEST A		
DTHER:				
 12. Describe Proposed or Completed Opwork) SEE RULE 1103. When this well was originall connected to a high pressuestimated 40 mcf. It is not hooked up to a high pressupossibility of laying a low pressure of the second sec	ly potentialed, it was m ure line (500#). Current t in the best of the well ure line. We are preser	aking 1133 which rec tly this well is only ca to produce this marc	quired this well be pable of making ginal well while	
possibility of laying a low pr				and the second second
			et t	s ind
			$\int_{\mathbb{T}} e^{i t t} f(t) = 0$	
			Charles and	
I hereby certify that the information above is	s true and complete to the best of my	knowledge and belief.		
I hereby certify that the information above is SIGNATURE	s true and complete to the best of my	knowledge and belief. TITLE Regulatory (Compliance	DATE 10/18/96
		0		
		0		DATE 10/18/96

State of New Mexico

Submit 3 Copies

Form C-103 0155