| Submit 3 Copies To Appropriate District | State o | State of New Mexico | | | Form C-103 |
|--|--|--|--|--|--------------------------|
| District I | Energy, Minera | Energy, Minerals and Natural Resources | | | March 4, 2004 |
| 1625 N. French Dr., Hobbs, NM 88240 | 25 N. French Dr., Hobbs, NM 88240 | | | WELL API NO. | |
| <u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210 | OIL CONSE | RVATION DIV | 'ISION | 30-039-27629 | of Logo |
| District III | 1220 South St. Francis Dr. | | | 5. Indicate Type STATE | of Lease ☐ FEE ☒ |
| 1000 Rio Brazos Rd., Aztec, NM 87410 District IV | 00 Rio Brazos Rd., Aztec, NM 87410 Strict IV Santa Fe, NM 87505 | | | 6. State Oil & G | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OF TUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM SOIT) FOR SUCH | | | | 7. Lease Name or Unit Agreement Name San Juan 27-5 Unit | |
| PROPOSALS.) | | | | | |
| 1. Type of Well: Oil Well Gas Well | ype of well: | | | 120N | |
| 2. Name of Operator | | | | 9. OGRID Numb | er |
| Burlington Resources Oil & Gas | Company LP | E office | J. 91 | 14538 | • |
| 3. Address of Operator | - | V. | * 87 | 10. Pool name or | Wildcat |
| 3401 E. 30 th Street, Farmington, | NM 87402 | XO25 | 10 J | Blanco Mesa | verde/Basin Dakota |
| 4. Well Location | | | | | |
| Unit Letter P: 1075 feet from the South line and 300 feet from the East line | | | | | |
| Section 23 | Township 27N | | 5W | | Arriba County, NM |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | | | |
| Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached) | | | | | |
| | | | | | from nonrest fresh water |
| Pit Location: UL P Sect 23 Twp 27N Rng 5W Pit type New Depth to Groundwater <50' Distance from nearest fresh water | | | | | |
| well >1000' Distance from nearest surface water >1000' Below-grade Tank Location UL Sect Twp Rng; | | | | | |
| feet from theline andfeet from thelinenit | | | | | |
| | | | | | |
| 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 WORK ALTERING CASING | | | | | |
| TEMPORARILY ABANDON [| CHANGE PLANS | □ cor | MMENCE DRI | LLING OPNS. | PLUG AND |
| PULL OR ALTER CASING [| MULTIPLE | □ CAS | SING TEST AN | iD 🗆 | ABANDONMENT |
| · | COMPLETION | CEN | MENT JOB | | |
| OTHER: New Drill Pit | | | HER: | | |
| 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. | | | | | |
| | | | | | |
| Burlington Resources proposes to construct a new drill pit. The new drill pit will be a lined pit as detailed in Burlington's | | | | | |
| general pit construction plan dated | | | | • | C |
| | | | | | |
| I hereby certify that the information | on above is true and come | lete to the heat of | my lenovylodov | and haliaf TE 4 | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines \square , a general permit \boxtimes or an (attached) alternative OCD-approved plan \square . | | | | | |
| C_{\bullet} | | | | | |
| SIGNATURE CASSAGE | Hunade | MITTLE Reg | ulatory Specia | list | DATE <u>5/13/04</u> |
| Type or print name Cassady | Harraden | E-mail address: | charraden@ | br-inc.com | Telephone No. 326-9700 |
| (This space for State use) | | | | | |
| (1mb space for brate use) | | TITLE | n man the state of | TOS CAST. M | MAY 10 5664 |
| APPPROVED BY 1 Year | y fromt | TITLE | <u>た。 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 </u> | Simplified on the same of the Adjoint of the State of the | DATE |
| Conditions of approval, if any: | | | | | |