Submit 3 Copies To Appropriate District Office	State of New M	exico		Form C-103	
District I	Energy, Minerals and Nat	ural Resources	/	March 4, 2004	
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.	5.01000		
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION			5-31830		
District III 1220 South St. Francis Dr.		5. Indicate Type of STATE	Lease FEE		
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		6. State Oil & Gas			
1220 S. St. Francis Dr., Santa Fe, NM			B-10889-30		
87505					
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				Unit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			Turner B Com A	`	
PROPOSALS.)			8. Well Number	#2005	
1. Type of Well:		12345	o. Well Nullibel	#2005	
Oil Well Gas Well Of	ner 33				
2. Name of Operator		AUD WOOD	9. OGRID Number	r 14538	
Burlington Resources Oil & Gas Com	pany LP	302			
3. Address of Operator	07400		10. Pool name or W		
3401 E. 30 th Street, Farmington, NM	8/402		Basin Fruitland	1 Coal	
4. Well Location	(E)				
Unit Letter A: 935 feet from the North dine and \$2890 feet from the East line					
Unit Letter A : 935 feet from the North dine and 1 890 feet from the East line					
Section 2	Township 30N Ran	ge 9W NI	MPM San Juan	County, NM	
	1. Elevation (Show whether Di			County, 1411	
11. Dievalen (one whomer DI, 14th, 11, 11, 11)					
Pit or Below-grade Tank Application (For pit	or below-grade tank closures, a fort	n C-144 must be attached	D		
Pit Location: ULSectTwp	Rng Pit type l	Depth to Groundwater	Distance from	nearest fresh water well	
	water Below-grade T			Rng ;	
feet from the line and				,	
Teet II VIII elle III e ullu	mac				
12. Check App	ropriate Box to Indicate I	Nature of Notice,	Report or Other I	D ata	
NOTICE OF INTENTION TO: SUB			SEQUENT REP	ORT OF:	
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WOR			< /	ALTERING CASING 🔲	
TEMPODADU VADANDON	UANGE SLANG	00141451105 001			
TEMPORARILY ABANDON C	HANGE PLANS	COMMENCE DRI		PLUG AND ABANDONMENT	
PULL OR ALTER CASING M	IULTIPLE	CASING TEST AN		ADAINDONWENT	
	OMPLETION	CEMENT JOB			
	_			_	
OTHER: Extension		OTHER:			
13. Describe proposed or complete					
of starting any proposed work).			_	n of proposed completion	
or recompletion.	PD EXT EX				
$\mathcal{F}I$.	PU CXL CXL	$9 \times 19 - 05$)		
	Please extend our application for permit to drill on the above referenced well.				
	#				
	#				
	#				
Please extend ou	r application for permit to dril	l on the above referer	aced well.	certify that any pit or below-	
	r application for permit to dril	on the above referen	aced well.		
Please extend out I hereby certify that the information aborgade tank has been/will be constructed or close	ve is true and complete to the led according to NMOCD guidelines	on the above references oest of my knowledge □, a general permit ⊠	aced well. c and belief. I further or an (attached) alternat	ive OCD-approved plan □.	
Please extend out I hereby certify that the information about	r application for permit to dril	on the above referen	aced well. c and belief. I further or an (attached) alternat	ive OCD-approved plan □.	
I hereby certify that the information aborgrade tank has been/will be-constructed or close SIGNATURE	ve is true and complete to the led according to NMOCD guidelines	on the above reference oest of my knowledge □, a general permit ⊠ Regulatory Sp	e and belief. I further or an (attached) alternate	ive OCD-approved plan □. TE 8/5/04	
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I hereby certify that the information aborgrade tank has been/will be constructed or close SIGNATURE Type or print name Joni Clark	ve is true and complete to the led according to NMOCD guidelines	on the above reference oest of my knowledge □, a general permit ⊠ Regulatory Sp	e and belief. I further or an (attached) alternate	ive OCD-approved plan □. TE 8/5/04	
I hereby certify that the information aborgrade tank has been/will be-constructed or close SIGNATURE	ve is true and complete to the led according to NMOCD guidelines	on the above reference oest of my knowledge □, a general permit ⊠ Regulatory Sp	e and belief. I further or an (attached) alternate	ive OCD-approved plan □. TE 8/5/04	
I hereby certify that the information aborgrade tank has been/will be constructed or close SIGNATURE Type or print name Joni Clark (This space for State use)	ve is true and complete to the led according to NMOCD guidelines E-mail address:	l on the above references Dest of my knowledge □, a general permit Regulatory Sp jclark@br-inc.co	e and belief. I further or an (attached) alternat ecialistDA	ive OCD-approved plan □. TE 8/5/04	
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