Submit 3 Copie: To Appropriate District Office	State of New Mexico		Form C-103		
District I	Energy, Minerals and Natural Resources		WELL API NO.		
625 N. French Dr., Hobbs, NM 88240 istrict II OH. CONSERDIA TION DIVISION		30-045-31933			
District III OIL CONSERVATION DIVISION District III 1220 South St. Francis Dr.			5. Indicate Type of	of Lease	
100 Rio Brazos Rd., Aztec, NM 87410		STATE [
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	Saina 10, 14141 67505		6 State Oil & Ga E-3520-1-NM	s Lease No.	
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 San Juan 32-9 Unit		
1. Type of Well: Oil Well Gas Well Other			8. Well Number 235S	235\$	
2. Name of Operator Purlington Possyraes Oil & Gos Company I P			9. OGRID Number 14538		
Burlington Resources Oil & Gas Company LP 3. Address of Operator			10. Pool name or Wildcat		
PO Box 4289, Farmington, NM 87499			Basin Fruitland Coal		
4. Well Location					
	825feet from the				
Section 36 Township 32N Range 9W NMPM San Juan County					
11. Elevation (Show whether DR, RKB, RT, GR, etc.)					
Pit or Below-grade Tank Application 🔲 or	Closure 🗌		taaaaaa		
Pit typeDepth to Groundwat	erDistance from nearest from	esh water well Dist	ance from nearest surfa	ace water	
Pit Liner Thickness: mil	Below-Grade Tank: Volume	bbls; Co	nstruction Material		
12. Check A ₁	ppropriate Box to Indicat	e Nature of Notice,	Report or Other	Data	
TEMPORARILY ABANDON	PLUG AND ABANDON CHANGE PLANS MULTIPLE COMPL	SUB: REMEDIAL WORI COMMENCE DRI CASING/CEMENT	LLING OPNS 🖂	PORT OF: ALTERING CASING D PAND A D	
OTHER:	П	OTHER:		П	
13. Describe proposed or comple		all pertinent details, and			
10/16/04 Drill to intermedia	oto TD @ 2310' Circ holo ele	on TOOL			
10/16/04 Drill to intermediate TD @ 3210'. Circ hole clean. TOOH. 10/17/04 TIH w/76 jts 7" 20# J-55 ST&C csg, set @ 3202'. Cmtd w/390 sxs Premium Lite FM w/3% calcium chloride, 0.25 pps flocele, 0.4% fluid loss, 5 pps LCM, 4% gel (831 cu. ft.). Tail w/90 sxs Type III cmt w/1% calcium chloride, 0.25 pps flocele, 0.2% fluid loss (124 cu. ft.). Circ 47 bbls cmt to surface. ND BOP. NU WH. RD. Rig released.					
			WASH BE	OCT 2004	
I hereby certify that the information al grade tank has been/will be constructed or cl	bove is true and complete to the losed according to NMOCD guideling	ne best of my knowledge nes □, a general permit □	e and belief. I furthe or an (attached) alterna	r certify that any pit or below- ative OCD-approved plan .	
SIGNATURE AMMY TO	noTITLE	ERegulatory Spec	ialist	DATE10/20/2004	
Type or print name For State Use Only APPROVED BY: Man 2	/ /	mail address: tjones3@ DEPU)7 OIL & GAS (AC) B	· ·	ephone No. 505-326-9700 OCT 2 1 2004 DATE	
Conditions of Approval (if any):					
		· · · · · · · · · · · · · · · · · · ·		Notes and the second of the se	