Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103	
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		June 16, 2008 WELL API NO.	
District II .	OIL CONSERVATION DIVISION		30-039-2749	6
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.		5. Indicate Type	
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505		STATE FEE 6. State Oil & Gas Lease No.	
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	10 S. St. Francis Dr., Santa Fe, NM		E-347-44	
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			7. Lease Name or Unit Agreement Name SAN JUAN 30-6 UNIT	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			8. Well Number 493S	
2. Name of Operator BURLINGTON RESOURCES OIL GAS COMPANY, LP			9. OGRID Number 14538	
3. Address of Operator			10. Pool name or Wildcat	
P.O. BOX 4289, FARMINGTON NM 87499			BASIN FRUITLAND COAL	
4. Well Location	S. A. C Al ENII	1:1 0153	C-4 C	ENNY I'
Unit Letter D : 935 Section 32 Tow				
Section 32 Township 030N Range 006W NMPM RIO ARRIBA County NM 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6850' GR				
12. Check A	ppropriate Box to Indicate	Nature of Notice,	Report or Other	Data
NOTICE OF INT			SEQUENT RE	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR			_	ALTERING CASING
	MULTIPLE COMPL	CASING/CEMEN		P AND A
OTHER:	П	OTHER:	DE DELIVERY	OEIDEIA A 🔯
13. Describe proposed or comple	eted operations. (Clearly state al		RE-DELIVERY ad give pertinent dat	05/05/11⊠ es, including estimated date
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion				
or recompletion.				
This well was shut in more than 90 da	ays due to new drill San Juan 30-	6 Unit 14M. Return	ed to production on	05/05/11 produced an
initial MCF of 250 .			RCVD AUG 31 '11	
			OIL CONS. DIV.	
TD 0 CD (0 1 '' 1MCE 4	7 0		i.	DIST. 3
TP: 8 CP: 68 Initial MCF: 29	50			DIDI. O
Meter No.: 120627				
Gas Co.: TEPPCO				
Project Type: REDELIVERY				
		•		
I hereby certify that the information a	bove is true and complete to the	best of my knowledg	ge and belief.	
	,			
SIGNATURE Jambes	TITLE_S	Staff Regulatory Tecl	hDATE	08/29/11
Type or print nameTamra Sessions For State Use Only	E-mail address: sessit	td@ConocoPhillips.c	com PHONE:50	5-326-9834
APPROVED BY Occupied F	or beard TITLE		DA	ATE .
Conditions of Approval (if any):	Per			
	1 *			