Submit 3 Copies To Appropriate District	State of New Me	exico	Form C-103
Office District I	Energy, Minerals and Natu	ral Resources	Jun 19, 2008
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-039-30911 5. Indicate Type of Lease
District III	1220 South St. Francis Dr.		STATE S FEE
1000 Rio Brazos Rd , Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr , Santa Fe, NM			E-2825-9
87505 SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(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.)			Wright State Com
1. Type of Well: Oil Well Gas Well Other			8. Well Number 3N
2. Name of Operator			9. OGRID Number
Burlington Resources Oil Gas Company LP			14538
3. Address of Operator P.O. Box 4289, Farmington, NM 87499-4289			10. Pool name or Wildcat Blanco MV/Basin DK/CH
4. Well Location			
Unit Letter N: 908 feet from the South line and 1877 feet from the West line			
Section 32		ange 7W	NMPM Rio Arriba County
	11. Elevation (Show whether DR,		
6576' GR 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
12. Check Appropriate Box to indicate Nature of Notice, Report of Other Bata			
	NTENTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK REMEDIAL WORK			
TEMPORARILY ABANDON	CHANGE PLANS MULTIPLE COMPL	COMMENCE DRI	<u> </u>
PULL OR ALTER CASING DOWNHOLE COMMINGLE	· · · · · · · · · · · · · · · · · · ·	CASING/CEMEN	1308
DOWN IOLE COMMINITOLE			-
OTHER 🛛 APD EXT		OTHER:	
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.			
of recompletion.			RCVD JAN 6'12
			OIL CONS. DIV.
Burlington Resources wishes to extend the APD approval for the subject well.			
			DIST. 3
CVA	EPPiles 2-5-2013		
	2 3- 251 3		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
signature Unleen Pe	llywoodTITLE_	Staff Regulatory	Technician DATE 115/12
Type or print name Arleen Kellywood E-mail address: arleen.r.kellywood@conocophillips.com PHONE: 505-326-9517			
For State Use Only	man address. arte	enizikeny woodia,eo	11011b. 303 320 7317
	√//	JPERVISOR DIST	DICT #3
APPROVED BY: (Men')	TITLE_	EL PICATOON DIST	MICI#3 DATE 1-13-1
Conditions of Approval (if any):	A		*