

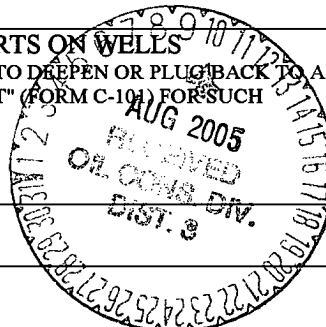
Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
March 4, 2004

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-045-33122
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name  Susco 16 State
8. Well Number  #101S
9. OGRID Number 14538
10. Pool name or Wildcat Basin Fruitland Coal - 71629



**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-104) FOR SUCH PROPOSALS.)

1. Type of Well:  
Oil Well ☐ Gas Well ☒ Other ☐

2. Name of Operator  
**Burlington Resources Oil & Gas Company LP**

3. Address of Operator  
**P.O. Box 4289, Farmington, NM 87499-4289**

4. Well Location  
Unit Letter O : 825 feet from the South line and 1930 feet from the East line  
Section 16 Township 32N Range 8W NMPM Rio Arriba County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

8/4/05 MIRU Aztec #580. PT csg 600#, 30 min ok. RIH w/8 3/4" bit & tagged cmt @122'. 8/8/05 D/O cmt & ahead to 3188'. Reached intermediate TD @ 1930 hrs 8/8/05. Circulate hole. 8/9/05 RIH w/74 jts of 7" 20# J55 ST&C csg set @ 3188'. Pumped preflush of 10bbls H2O, 10bbls mud, 10bbls H2O. Pumped 19sxs(57cu-10bbls)prem lite scavenger cmt w/3% CaCl2, .25pps Cell-o-Flake, 5pps LCM1, .4% FL52, .4% SMS. Cemented lead w/363sxs(773cu-138bbls)prem lite w/3% CaCl2, .25pps Cell-o-Flake, 5pps LCM1, .4% FL52, .4% SMS. Tail in w/90sxs(124cu-22bbls)Type 3 cmt w/ .25pps Cell-o-Flake, 1% CaCl2. Displaced w/127bbls H2O. Bump plug from 1134# to 1585#. Circulated 27bbls of cmt to reserve pit. Plug down @ 1700 hrs. RD Rig released 8/8/05 Will show casing PT on next report. PT will be conducted by completing rig.

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 ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Amanda Sandoval TITLE Regulatory Assistant II DATE 8/9/05

Type or print name Amanda Sandoval E-mail address: asandoval@br-inc.com Telephone No. 505-326-9891

(This space for State use)

APPROVED BY Charles [Signature] TITLE SUPERVISOR DISTRICT # 3 DATE AUG 10 2005  
Conditions of approval, if any: