Submit 3 Copies to Approtriate District	State of Nev	v Mexico		Form C-	103
Office.	Energy, Mineral	s and Natural	Revised March 25, 1999		
District I 1625 N. French Dr., Hobbs, NM 88240	Resour	rces	WELL API NO.		
District II	MI COMSEDMAT	NOISIVIO NOK	30045316840000		
District II OIL CONSERVATION DIVISION District III OIL CONSERVATION DIVISION 1220 South St. Francis Dr.			5. Indicate Type of L	ease	
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505			STATE	FEE X	
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM			6. State Oil Gas Lea	se No.	İ
87505			FEE		70077700
SUNDRY NOTICES AND RI (DO NOT USE THIS FORM FOR PROPOSALS TO DI DIFFERENT RESERVOIR. USE "APPLICATION FOR PROPOSALS.) 1. Type of Well: Oil Well Gas Well X	RILL OR TO DEEPEN O		7. Lease Name or Ur VASALY COM	nit Agreement Name	SEP 2005
2. Name of Operator Burlington Resources Oil Gas Company LP			8.Well No. 1M	81	UN. SON.
3. Address of Operator PO Box 4289, Farmington, NM 87499			9. Pool name or Wild BLANCO MESAVE	· \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	94 7 1 1 N 6
4. Well Location		· · · · · · · · · · · · · · · · · · ·	A	DAK	TEL CLIL MAN
1060' FNL & 660' FWL D S: 22 T 030N R: 011W	NMPM	(County San Juan	0110	deen
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 5776 GR					
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK PLUG AN	ND ABANDON	REMEDIAL WORK	ALTI	ERING CASING	
TEMPORARILY ABANDON CHANGE	PLANS	COMMENCE DRILLIN		G AND	
PULL OR ALTER CASING MULTIPICOMPLE	1 1	CASING TEST AND CEMENT JOB	ABA	NDONMENT	
`					
OTHER:		OTHER: SUNDRY			X
12. Decribe proposed or completed operatio date of starting any proposed work). SEE R completion or recompletion.				gram of proposed	
This well delivered on 4/6/2005 and produ	ced natural gas and	entrained hydrocarb	ons.	21 PM 2 RECEIVED ARBHHOTOL	
TP: 189 CP: 970 Initial MCF: 589	Char	ero - D KDM	mc r		
Meter No. 98960	DAI	$C \propto m$	(F	7	
Gas Co: EPFS	DI				
I hereby certify that the information above is	s true and complete	to the best of my kno	owledge and belief.	_ ယ	
SIGNATURE Title Mooden TITLE Volume Management Specialist DATE 9/19/2005					
Type or print name Stella Montoya				No. (505) 599 - 40°	79
(This space for State use)			ACCE	DTED	
APPROVED BY Chaliffer TITLE ACCEPTED FOR RECORD DATE					
Conditions of approval, if any:				SEP 2 3 20	 105
			FARMII	VGTON DIOTO	