

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

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

Form C-103

Revised March 25, 1999

WELL API NO. 30045321100000	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil Gas Lease No. FEE	
7. Lease Name or Unit Agreement Name: DECKER	
8. Well No. 3B	
9. Pool name or Wildcat BASIN DAKOTA (PRORATED GAS)	
4. Well Location 710' FSL & 1880' FWL N S: 23 T 032N R: 012W NMPM County San Juan	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 6346 GR	
SUNDY 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.) 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator Burlington Resources Oil Gas Company LP	
3. Address of Operator PO Box 4289, Farmington, NM 87499	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐

OTHER: SUNDRY ☒

12. 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.

This well delivered on 3/30/2005 and produced natural gas and entrained hydrocarbons.

TP: 515 CP: 425 Initial MCF: 0

Meter No. 36560

Gas Co: WFS

MV 275 MCF

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Stella Montoya TITLE Volume Management Specialist DATE 9/19/2005

Type or print name Stella Montoya

Telephone No. (505) 599-4079

(This space for State use)

APPROVED BY Chalith TITLE _____ DATE _____

Conditions of approval, if any:

ACCEPTED FOR RECORD

SEP 20 2005

FARMINGTON DISTRICT OFFICE
BY [Signature]

DOWN

NMOCD