

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised July 18, 2013

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

WELL API NO. 30-045-06098
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-3148-20
7. Lease Name or Unit Agreement Name Mobil New Mexico B Com
8. Well Number #1
9. OGRID Number 14538
10. Pool name or Wildcat Basin Dakota

**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 PROPOSALS.)

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator  
Burlington Resources Oil & Gas, LP

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

4. Well Location  
 Unit Letter: P : 790' feet from the South line and 790' feet from the East line  
 Section 32 Township 27N Range 9W NMPM San Juan County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
6523'

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Tubing Repair & C/O Fill <input checked="" 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

4/8/14 RU slickline and RIH. Tagged up @ 6783'. POOH. LD Slickline.  
 4/9/14 MIRU AWS 731. ND WH, NU BOP. PT-OK. TOH w/209 jts 2-1/16" tubing. RIH and cleaned out fill to 6885'. TIH w/207 jts of new 2-1/16" tubing and landed @ 6773' w/FN @ 6772'. (new setting depth). ND BOP, NU WH. RD & released rig @ 1930 hrs 4/14/14.

OIL CONS. DIV DIST. 3

APR 22 2014

Spud Date:  Rig Release Date:

*Future Sundries include the weight & grade*  
 I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Patsy Clugston TITLE Staff Regulatory Technician DATE 4/15/14

Type or print name Patsy Clugston E-mail address: Patsy.L.Clugston@conocophillip.com PHONE 505-326-9518

**For State Use Only**

APPROVED BY: [Signature] TITLE Deputy Oil & Gas Inspector, District #3 DATE 4-25-14  
 Conditions of Approval (if any): AV