

**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

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

Form C-103
Revised July 18, 2013

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.)		WELL API NO. 30-045-31048
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Burlington Resources Oil & Gas, LP		6. State Oil & Gas Lease No. B-9320-11
3. Address of Operator P.O. Box 4289, Farmington, New Mexico 87499-4239		7. Lease Name or Unit Agreement Name Huerfanito Unit
4. Well Location Unit Letter <u>G</u> ; <u>1970</u> feet from the <u>North</u> line and <u>1870</u> feet from the <u>East</u> line Section <u>2</u> Township <u>26N</u> Range <u>9W</u> NMPM San Juan County		8. Well Number <u>#15J</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>6290'</u>		9. OGRID Number <u>14538</u>
		10. Pool name or Wildcat Ballard Pictured Cliffs

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"/>	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: Redelivery Notice <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.

This well was re-delivered on 5/19/2014 and produced natural gas and entrained hydrocarbons.

Notes: Redelivered on 5/19 after being SI for more than 90 days

OIL CONS. DIV DIST. 3

TP 26 CP 26 Initial MCF: 159

MAY 22 2014

Meter 98557
Gas Co: ENT
Project Type: Redelivery

Spud Date:

Rig Release Date:

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

SIGNATURE

TITLE

DATE

Type or print name

E-mail address:

PHONE:

For State Use Only

APPROVED BY

TITLE

DATE

Conditions of Approval (if any):

*Accepted for
Record*

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