

**Submit 1 Copy To
Appropriate District**

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

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

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

WELL API NO. 30-045-05613	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No. B-9096-14	
7. Lease Name or Unit Agreement Name Huerfano Unit Com	
8. Well Number #134	
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 **OIL CONS. DIV DIST. 3**
Burlington Resources Oil & Gas, LP

3. Address of Operator **JUL 14 2014**
P.O. Box 4289, Farmington, New Mexico 87499-4239

4. Well Location
Unit Letter **J**; **1650** feet from the **South** line and **1650** feet from the **East** line
Section **36** Township **26N** Range **10W** NMPM **San Juan** County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
6699' GR

12. 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 COMPL
 DOWNHOLE COMMINGLE
 CLOSED-LOOP SYSTEM
 OTHER:

SUBSEQUENT REPORT OF:

- REMEDIAL WORK ALTERING CASING
 COMMENCE DRILLING OPNS. P AND A
 CASING/CEMENT JOB
 OTHER: **Redelivery Sundry**

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 7/9/2014 and produced natural gas and entrained hydrocarbons.
Note: Re-delivered on 7/9/14 after being shut-in for more than 90 days due to surface equipment issues.

TP: **410** CP: **490** Initial MCF: **466**
 Meter: **14035** Gas Co: **Enterprise** 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 *Patsy Clugston* TITLE Staff Regulatory Technician DATE 7/10/14

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

For State Use Only

APPROVED BY Accepted for Record TITLE W DATE _____
 Conditions of Approval (if any): _____