

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

Form C-103  
Jun 19, 2008

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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		WELL API NO. <b>30-039-24811</b>
2. Name of Operator <b>Burlington Resources Oil Gas Company LP</b>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
3. Address of Operator P.O. Box 4289, Farmington, NM 87499-4289		6. State Oil & Gas Lease No. FEE
4. Well Location Unit Letter <b>G</b> : <b>1640</b> feet from the <b>North</b> line and <b>1645</b> feet from the <b>East</b> line Section <b>23</b> Township <b>29N</b> Range <b>07W</b> NMPM <b>Rio Arriba</b> County		7. Lease Name or Unit Agreement Name <b>San Juan 29-7 Unit NP</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6225' GR		8. Well Number <b>560</b>
		9. OGRID Number <b>14538</b>
		10. Pool name or Wildcat <b>Basin Dakota</b>

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

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input checked="" type="checkbox"/> <b>RE-DELIVERY</b>
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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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

This well was shut in for more than 90 days due to meter issue. Returned to production on 8/21/15.

TP: 120 CP: 38 Initial MCF: 195

Meter No.: 61016 Gas Co.: WFC

Project Type: REDELIVERY

OIL CONS. DIV DIST. 3

AUG 27 2015

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

SIGNATURE Arleen White TITLE Staff Regulatory Technician DATE 8/27/15

Type or print name Arleen White E-mail address: arleen.r.white@conocophillips.com PHONE: 505-326-9517  
For State Use Only

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
Conditions of Approval (if any):

KC  
alb