

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. 3004531828
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. K-5737
7. Lease Name or Unit Agreement Name RATTLESNAKE CANYON
8. Well Number 104S
9. OGRID Number 14538
10. Pool name or Wildcat FRC - BASIN CB; FRUITLAND COAL

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

4. Well Location  
Unit Letter O : 740 feet from the SOUTH line and 1535 feet from the EAST line  
Section 32 Township 32N Range 08W NMPM County SAN JUAN

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

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: ☒ RE-DELIVERY

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 shut in for more than 90 days due to Economics. Returned to production on 10/27/16.

TP: 0 CP: 93 Initial MCF: 9

Meter No.: 122963

Gas Co.: ENT

Project Type: REDELIVERY

OIL CONS. DIV DIST. 3

DEC 14 2016

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 Christine Brock TITLE Regulatory Specialist DATE \_\_\_\_\_

Type or print name Christine Brock E-mail address: Christine.Brock@cop.com PHONE: 505-326-9775

For State Use Only

ACCEPTED FOR RECORD

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval (if any):

AV