Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103	
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natu	iral Resources	WELL API	Jun 19, 2008	
District II	OIL CONCEDUATION DIVISION		30-045-31932		
1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		5. Indicate Type of Lease STATE ☐ FEE ☒		
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87	7505		l & Gas Lease No.	
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			7. Lease Name or Unit Agreement Name Randleman		
PROPOSALS.) 1. Type of Well: Oil Well ☐ Gas Well ☒ Other		8. Well Number 1B			
2. Name of Operator			9. OGRID Number		
Burnington Resources On Gas Company Lr			14538 10. Pool name or Wildcat		
3. Address of Operator P.O. Box 4289, Farmington, NM 87499-4289 MAY 18 2017			Blanco Mesaverde		
4. Well Location					
Unit Letter C: 725 feet from the North line and 2390 feet from the West line					
Section 13		ange 11W	NMPM	San Juan County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5862' GR					
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN DOWNHOLE COMMINGLE			K LLING OPNS	T REPORT OF: ALTERING CASING AND A C	
OTHER:		OTHER: X TA			
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.					
5/15/2017 Performed MIT Test. PT csg to 565#/30min. Test - OK. Chart attached.					
Spud Date: Rig Released Date:					
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE Lemistrie	Brock TITLE	Regulatory Spec	ialistD	DATE 5/16/17	
Type or print name Christine Broo	ck E-mail address: ch	ristine.brock@cono	cophillips.co	m PHONE: 505-326-9775	
For State Use Only Deputy Oil & Gas Inspector,					
APPROVED BY: Ban	TITLE_	District #	3	DATE 5/25/17	
Conditions of Approval (if any):	· ·				

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