

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

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

Form C-103  
Revised May 08, 2003

WELL API NO. 30-045-31750
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Culpepper Martin
8. Well Number 108
9. OGRID Number 14538
10. Pool name or Wildcat Basin Fruitland Coal
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5923' GR

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 CBM ☐

2. Name of Operator  
Burlington Resources Oil & Gas Company LP

3. Address of Operator  
PO Box 4289, Farmington, NM 87499

4. Well Location  
Unit Letter A : 1135 feet from the North line and 905 feet from the East line  
Section 32 Township 32N Range 12W NMPM San Juan County

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"/>	REMEDIAL WORK <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
CHANGE PLANS <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
MULTIPLE COMPLETION <input type="checkbox"/>	OTHER: <input type="checkbox"/>
OTHER: <input 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

It is intended to revise the approved BOP stack for the subject well. Attached is the new BOP diagram and associated choke manifold diagram. This BOP and choke manifold arrangement will be utilized on a smaller, purpose fit, shallow well drilling rig.

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

SIGNATURE Peggy Cole TITLE Regulatory Supervisor DATE JUL 21 2003

Type or print name Peggy Cole Telephone No. (505) 326-9700

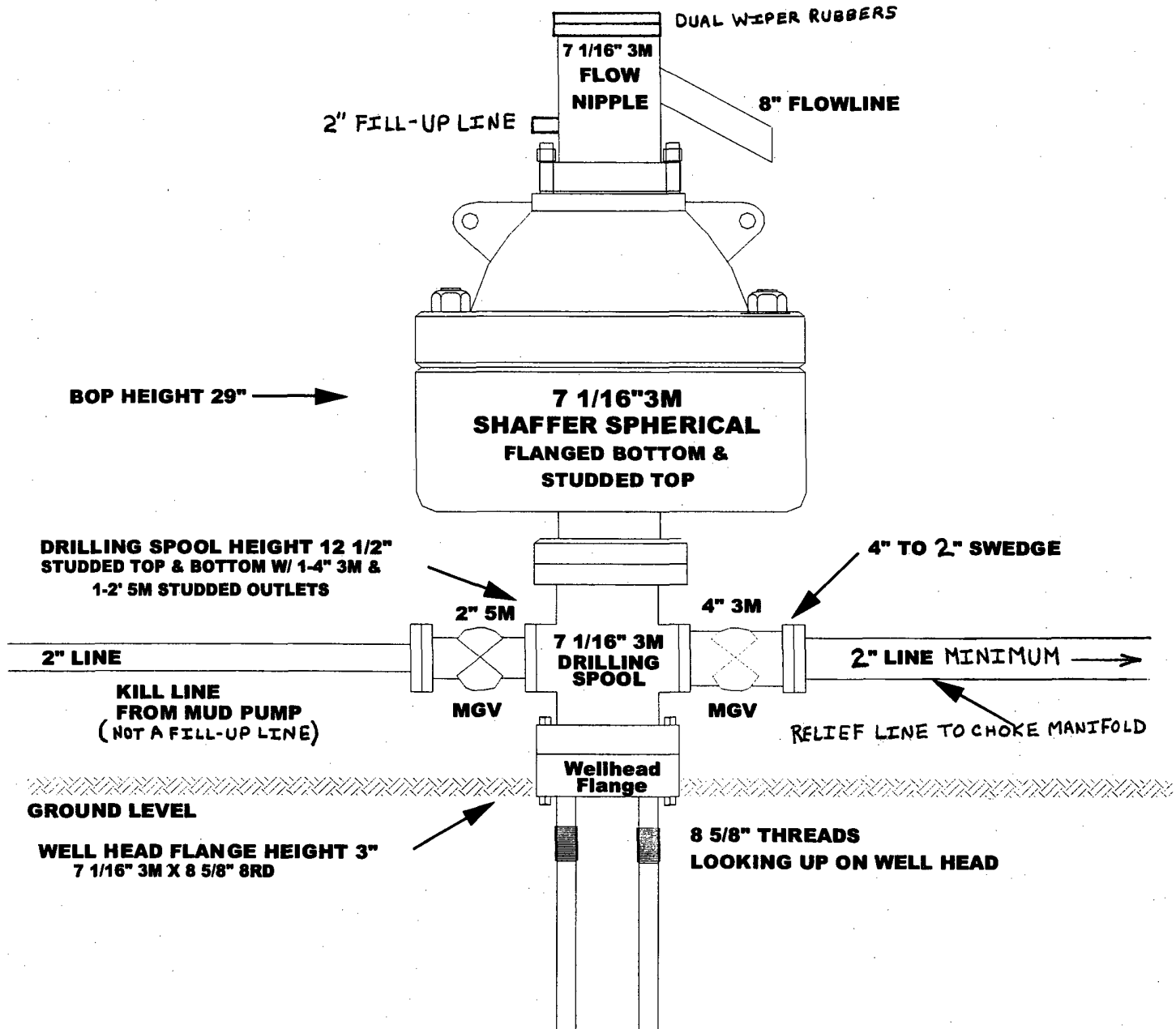
(This space for State use)

APPROVED BY Charlie Herr TITLE DEPUTY OIL & GAS INSPECTOR, DIST. 3 DATE JUL 21 2003

Conditions of approval, if any:

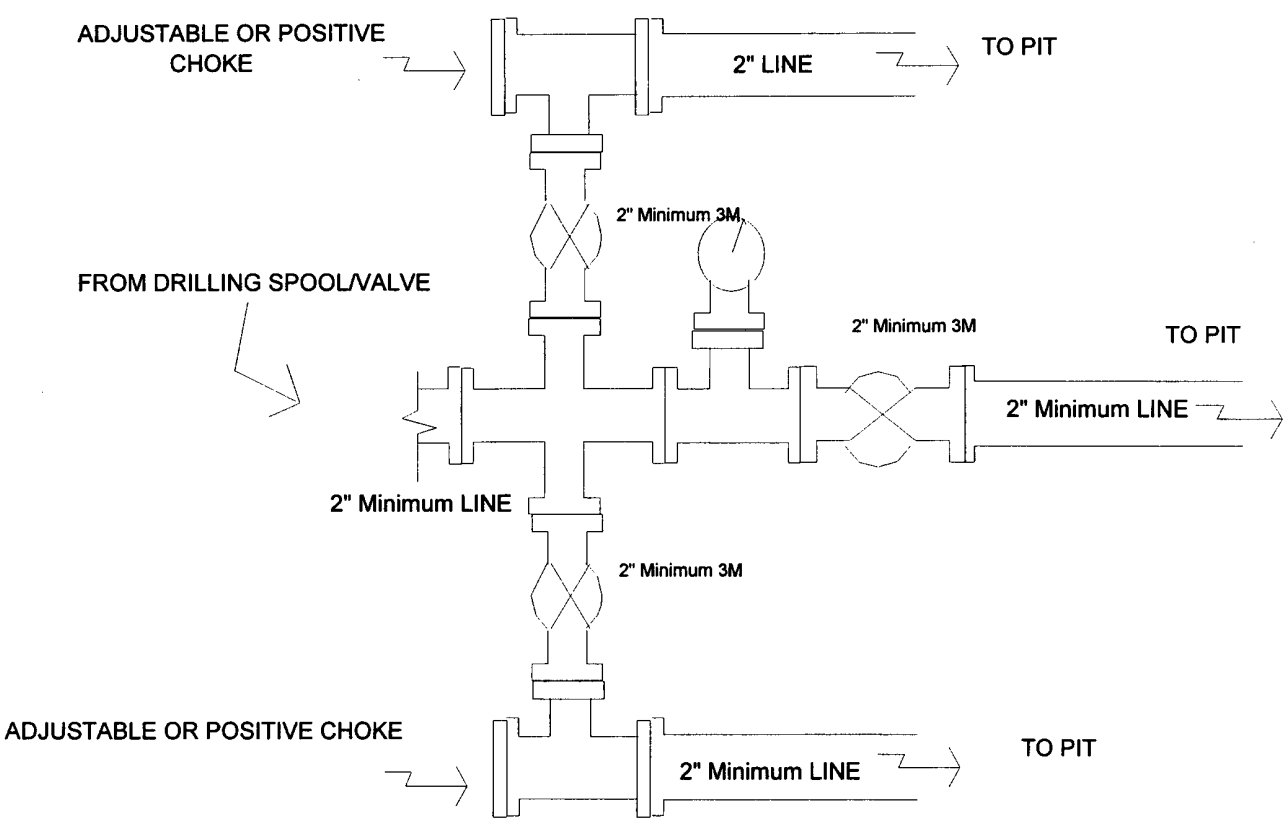
# Drilling Rig

## 3000 psi BOP System



# BURLINGTON RESOURCES

## Drilling Rig Choke Manifold Configuration 3000 psi System



Choke manifold installation from Surface Casing  
Point to Total Depth. 3,000 psi working pressure  
equipment with two chokes.