

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

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.)		WELL API NO. 30-045-31212
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other CBM <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Burlington Resources Oil & Gas Company LP		6. State Oil & Gas Lease No.
3. Address of Operator PO Box 4289, Farmington, NM 87499		7. Lease Name or Unit Agreement Name Allison Unit
4. Well Location Unit Letter <u>F</u> : <u>1920</u> feet from the <u>North</u> line and <u>1960</u> feet from the <u>West</u> line Section <u>19</u> Township <u>32N</u> Range <u>6W</u> NMPM San Juan County		8. Well Number 113S
		9. OGRID Number 14538
		10. Pool name or Wildcat Basin Fruitland Coal
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6411' GR		

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input checked="" 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.

The subject well is in the participating area of the Allison Unit. No notification required under R-8768-F.

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 8-18-03

Type or print name Peggy Cole

(This space for State use)

DEPUTY OIL & GAS INSPECTOR, DIST. 4 Telephone No. (505) 326-9700

APPROVED BY [Signature] TITLE DEPUTY OIL & GAS INSPECTOR, DIST. 4 DATE AUG 20 2003

Conditions of approval, if any: