| Submit 3 Copies To Appropriate District Office | State of New Mexico | | | Form C-103 | | | |
|---|--|-------------|-----------------|---|------------|--|---|
| <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 | Energy, Minerals and Natural Resources | | | WELL API NO. | | | |
| District II | OIL CONSERVATION DIVISION | | | 30-045-34358 | | | |
| 1301 W. Grand Ave., Artesia, NM 88210 District III | 1220 South St. Francis Dr. | | | 5. Indicate STA | | ease FEE 🎵 | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 District IV | Santa Fe, NM 87505 | | | 6. State Oil | | | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | | Fede | eral Lease | # NM-019413 | |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | | | | 7. Lease Name or Unit Agreement Name | | | |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) | | | | McDurmitt Com 8. Well Number | | | |
| 1. Type of Well: Oil Well Gas Well X Other | | | | #100M | | | |
| 2. Name of Operator Burlington Resources Oil & Gas Company LP | | | | 9. OGRID Number 14538 | | | |
| 3. Address of Operator | | | | 10. Pool name or Wildcat / C Blanco PC- 72359 / Basin - 71629 | | | |
| P.O. Box 4289, Farmington, NM 87499-4289 4. Well Location | | | | Bianco PC- | /2339 / B | - /1029 | |
| | | | | | | | |
| Unit Letter E: 1405' feet from the North line and 1125' feet from the West line | | | | | | | |
| Section 6 | Township | 31N | Range 12W | NMPM | San Juai | n County | |
| | 11. Elevation (Show wh | | · |) | 100 | LONGESTADO LONGESTADO LONGESTADO | |
| | | 587 | 9' | | | | |
| 12 Check A | nnronriate Roy to In | dicate N | ature of Notice | Report or C |)ther Dat | ta | |
| 12. Check Appropriate Box to Indicate Nature of Notice, I NOTICE OF INTENTION TO: | | | | | REPO | | |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WO | | | | | | TERING CASING [|] |
| TEMPORARILY ABANDON | CHANGE PLANS | | COMMENCE DRI | LLING OPNS | | UG AND [ANDONMENT | コ |
| PULL OR ALTER CASING | MULTIPLE COMPLETION | | CASING TEST AN | ND | | , ii (BO) (iii) El (I | |
| OTHER: | Commingle | \boxtimes | OTHER: | | | |] |
| 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 drill and complete the subject well in the Basin Fruitland Coal (Pool Code 72359) and the Blanco Pictured Cliffs (Pool Code 71629). The production will be commingled according to Oil Conservation Division Order Number 11363. Allocation and methodology will be provided after the well is completed. Commingling will not reduce the value of production. The Bureau of Land Management Office has been notified in writing of this application. | | | | | | | |
| Management Office has been notified | d in writing of this applic | ation. | | | | | |
| Existing perforations are: $PC - 1682' - 2201'$; $FC - 2201' - 2401'$ | | | | RCVD OCT 30 '07 | | | |
| Interest is common, no notification is necessary. $DHC2730AZ DIST = 0.007$ | | | | | | | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan. | | | | | | | |
| SIGNATURE CONTROL TITLE Regulatory Technician DATE 10/29/07 | | | | | | | |
| Type or print name Sasha Spangler E-mail address: spangs@conocophillips.com Telephone No. 505-326-9568 | | | | | | | |
| (This space for State use) | | | | | | | |
| APPPROVED BY TITLE District #3 DATE 11/21/07 | | | | | | | |
| APPPROVED BY TITLE District #3 DATE ///> Conditions of approval, if any: | | | | | | ATE /1/2//07 | _ |
| Conditions of approval, if any. | • | | | | 8 | | |