| Submit 3 Copies To Appropriate District Office  | State of New Mexico                    |              |                     | Form C-103<br>March 4, 2004       |                                    |
|---|--|--------------|---------------------|-----------------------------------|------------------------------------|
| <u>District I</u><br>1625 N. French Dr., Hobbs, NM 88240  | Energy, Minerals and Natural Resources |              |                     | WELL API NO.                      |                                    |
| District II   | OIL CONSERVATION DIVISION              |              |                     | 30-039-30382                      |                                    |
| 1301 W. Grand Ave., Artesia, NM 88210<br><u>District III</u>  | 1220 South St. Francis Dr.             |              |                     | 5. Indicate Type                  |                                    |
| 1000 Rio Brazos Rd., Aztec, NM 87410<br>District IV   | Santa Fe, NM 87505                     |              |                     | STATE 6. State Oil & G            | as Lease No                        |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505  | ,                                      |              |                     |                                   | SF-079729                          |
| SUNDRY NOTICES AND REPORTS ON WELLS   |  |              |                     | 7. Lease Name of                  | or Unit Agreement Name             |
| (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 |  |              |                     | San Jane 20 4 Hait                |                                    |
| PROPOSALS.)   |  |              |                     | San Juan 28-4 Unit 8. Well Number |                                    |
| 1. Type of Well:  |  |              |                     | o. Well Number                    | #17M                               |
| Oil Well Gas Well   | Other 📙                                |              |                     | 9. OGRID Number                   |                                    |
| 2. Name of Operator  Burlington Resources Oil & Gas Company, LP   |  |              |                     | 9. OGRID Nulliber<br>14538        |                                    |
| 3. Address of Operator  |  |              |                     | 10. Pool name or Wildcat          |                                    |
| P.O. Box 4289, Farmington, NM 87499-4289  |  |              |                     | Blanco MV / Basin DK              |                                    |
| 4. Well Location  |  |              |                     |                                   |                                    |
| Unit Letter F: 1915 feet from the North line and 1530 feet from the West line   |  |              |                     |                                   |                                    |
| Olit Better   | is rect from thei                      | TOTH         | _ IIIIe und         |                                   | vv estinte                         |
| Section 20 Township 28N Range 4W NMPM Rio Arriba County   |  |              |                     |                                   |                                    |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 7440' GR   |  |              |                     |                                   |                                    |
| 7440 UK   |  |              |                     |                                   |                                    |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  |  |              |                     |                                   |                                    |
| NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF   |  |              |                     |                                   |                                    |
| PERFORM REMEDIAL WORK   |  |              | REMEDIAL WORK       |                                   | ALTERING CASING                    |
| TEMPORARII VARANDON   | 01141105 51 4110                       |              | 001415105 001       |                                   | DI 110 AND                         |
| TEMPORARILY ABANDON   | CHANGE PLANS                           |              | COMMENCE DRI        | LLING OPNS.                       | PLUG AND  ABANDONMENT              |
| PULL OR ALTER CASING  | MULTIPLE                               |              | CASING TEST AN      | ND 🗆                              | ,                                  |
|   | COMPLETION                             |              | CEMENT JOB          |                                   |                                    |
| 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.  |  |              |                     |                                   |                                    |
| In reference to Order #R-11363 Burlington Resources proposed to downhole commingle in the Basin Dakota and Blanco Mesaverde.                        |  |              |                     |                                   |                                    |
| Friday 6 4 N. 1051 (550) DV (550) 0050  |  |              |                     |                                   |                                    |
| Existing perforations are: MV – 6195' – 6568'; DK – 8589' - 8856' Allocation will be tested.  |  |              |                     |                                   |                                    |
| Commingling will not reduce the value of the remaining production.  |  |              |                     |                                   | RCVD JUL 3 '08                     |
| The Bureau of Land Management has been notified of our intent.  |  |              |                     |                                   | OIL CONS. DIV.                     |
| As referenced in Order #R – 12865 in  | iterest owners were not r              | e-notified.  |                     |                                   | DIST. 3                            |
| I hereby certify that the information a   | above is true and complet              | te to the be | est of my knowledge | e and belief. I furt              | ner certify that any pit or below- |
| grade tank has been/will be constructed or  |  |              |                     |                                   |                                    |
| SIGNATURE   |  |              |                     |                                   |                                    |
| TILL. Regulatory Technician DATE 0/102/2008   |  |              |                     |                                   |                                    |
| Type or print name Crystal Tafoya E-mail address: crystal.tafoya@conocophillips.com Telephone No. 505-326-9837                                      |  |              |                     |                                   |                                    |
| (This space for State use)  |  | ń            | 1/22                | - (1 M                            |                                    |
| (This space for State use)  A DHC 2909 A Z  |  |              |                     |                                   |                                    |
| Deputy Oil & Gas Inspector, IIII 0 2 200  |  |              |                     |                                   |                                    |
| APPPROVED BY  | Flyn                                   | TITLE        | Deputy On & \       | ct #3                             | T, JUL 0 2 200                     |
| Conditions of approval, if any:   | 11                                     | ****         |                     |                                   |                                    |