Submit 3 Copies To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources		Form C-103	
District I 3 1625 N. French Dr., Hobbs, NM 88240			June 16, 2008 WELL API NO.	
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		3004510370	
District III	1220 South St. Francis Dr		5. Indicate Type of Lease STATE ☐ FEE ☒	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease	
1220 S. St. Francis Dr., Santa Fe, NM 87505			FEE	
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 WILMUTH	
PROPOSALS.)			8. Well Number 1	
1. Type of Well: Oil Well Gas Well Other 2. Name of Operator			9. OGRID Number 145	30
BURLINGTON RESOURCES OIL & GAS COMPANY LP			2. COIGD Number 14550	
3. Address of Operator			10. Pool name or Wildcat	
P.O. BOX 4289, FARMINGTON NM 87499			BLANCO MESAVERDE	
4. Well Location	fact from the FSI 1;	no and 1500?	feet from the FWL	line
Unit Letter N : 800' feet from the FSL line and 1500' feet from the FWL line Section 26 Township 031N Range 011W NMPM SAN JUAN County NM				
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
45 J	'GR			
12. Check Ap	propriate Box to Indicate N	ature of Notice,	Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WOR			RK ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR) A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMEN	II JOB	
OTHER:		OTHER:	RE-DELIVERY 04/08	
13. Describe proposed or complet				
or recompletion.). SEE RULE 1103. For Multipl	e Completions: A	mach wellbore diagram of p	roposed completion
•				
This well was shut in due to replacing rods. It was re-delivered on $\underline{04/08/09}$ produced an initial MCF of $\underline{30}$.				
			RCVD MAY 1'09	
TP: 480 CP: 0 Initial MCF: 30			ON COME DIT	
35 (N			OIL CONS. DIV.	
Meter No.: 72325			DIS	T. 3
Gas Co.: EFS				•
Project Type: REPLACE RODS				
Troject Type: REI LACE RODS				4
	•			
/	. 1			
I hereby certify that the information ab	ove is true and complete to the be	est of my knowledg	ge and belief.	
Mondala	.///			
SIGNATURE WWW.	U TITLE Re	gulatory Tech	DATE	04/29/09
101.				
Type or print nameMarie E. Jarami	lo E-mail address: mar	ie.e.jaramillo@Cor	nocoPhillips.com PHONE:	505-326-9865
For State Use Only	_			
APPROVED BY: accepted to	rocord TITLE		DATE	
Conditions of Approval (if any):	K	'		
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