Submit 3 Copies To Appropriate District	State of 1	Vew Me	exico		Form C-103
Office District I	State of New Mexico Energy, Minerals and Natural Resources			June 16, 2008	
1625 N. French Dr., Hobbs, NM 88240 District II				WELL API NO. 3003930626	
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION			5. Indicate Type of	Lease
District III 1000 Rio Brazos Rd , Aztec, NM 87410	1220 South St. Francis Dr. Santa Fe, NM 87505			STATE S FEE	
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa 1 C, 14141 67 303			6. State Oil & Gas Lease No. E-290-37	
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 SAN JUAN 28-6 UNIT	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)				8. Well Number 169P	
Type of Well: Oil Well Gas Well Other Name of Operator				9. OGRID Number	14538
BURLINGTON RESOURCES OIL & GAS COMPANY LP				10. Dool some or Wildoot	
3. Address of Operator P.O. BOX 4289, FARMINGTON NM 87499				10. Pool name or Wildcat BASIN DAKOTA / BLANCO MESAVERDE	
4. Well Location					
	feet from the _FSL nip 027N Range				
Section 2 Townsl	nip 027N Range 11. Elevation (Show wh	006\ ether DR		RIO ARRIBA Count	y NM .
	6669' GR				
12. Check	Appropriate Box to Inc	dicate N	ature of Notice	, Report or Other D	ata
NOTICE OF I	NTENTION TO:		SUF	BSEQUENT REP	ORT OF
PERFORM REMEDIAL WORK	☐ PLUG AND ABANDON ☐ REMEDIAL WORK			RK 🗌 A	LTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLING OPNS. P AND A CASING/CEMENT JOB		
PULL OR ALTER CASING	MULTIPLE COMPL	Ц	CASING/CEMEI	NT JOB L	
OTHER: 13. Describe proposed or com	alated appretions (Clearly	ototo ell'a	OTHER:	FIRST-DELIVERY	06/23/09 🖂
	ork). SEE RULE 1103. Fo				
(Closed loop) This well is a new drill and was first	t-delivered on <u>06/23/09</u> and	d produce	ed natural gas-and	entrained hydrocarbons	of <u>26,425</u> MCF.
NOTE: THIS WELL WAS DELIV 06/23/09, MV & DK FLOWING T					
TP: N/A CP: N/A	Initial MCF: 26,425				
Meter Ño.: 83045					ND JUL 21 '09 IL CONS. DIV.
Gas Co.: WFS					DIST. 3
				·	
I hereby certify that the information	above is true and complete	e to the b	est of my knowled	ge and belief.	
SIGNATURE Tambe	mi TITI	.ESt	aff Regulatory Tec	chDATE	07/17/2009
Type or print nameTamra Session	ons E-mail address	s: tamra.	d.sessions@Conoc	coPhillips.com PHONE	
For State Use Only		nd (. s.		-//
APPROVED BY: Accepted to Conditions of Approval (if any):	or record TITL	E Con	pleance O	fficer DATE	E 7/21/09
Conditions of Approval (II any)://			y v	· •	en.
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