Submit 3 Copies To Appropriate District	State of New Mexico			Form C-103
Office District 1	Energy, Minerals and Natural Resources		Jun 19, 2008	
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
District II 1301 W. Grand Ave, Artesia, NM 88210	OIL CONSERVATION DIVISION		30-045-34940	
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 No.	
1220 S St. Francis Dr., Santa Fe, NM	,		B-10938-55	
87505	TOTAL AND DEPONES ON WAY A			
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.)			7. Lease Name or Unit Agreement Name Stanolind Gas Com	
1. Type of Well: Oil Well	Gas Well 🛛 Other	8. Well Number 1B		
2. Name of Operator			9. OGRID Number	
Burlington Resources Oil Gas Company LP			14538	
3. Address of Operator			10. Pool name or Wildcat	
P.O. Box 4289, Farmington, NM 87499-4289			Blanco Mesa	averde / Basin Dakota
4. Well Location				
Unit Letter P: 33	feet from the South	_line and	feet from the	<u>East</u> line
Section 16	Township 30N R	ange 8W	NMPM San	Juan County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
6426' GR				
12. Check	Appropriate Box to Indicate N	lature of Notice,	Report or Other	: Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
ERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK				ALTERING CASING
TEMPORARILY ABANDON	=	COMMENCE DRI		P AND A
PULL OR ALTER CASING	T	CASING/CEMEN		_
DOWNHOLE COMMINGLE	 			
		_		
OTHER:		OTHER: SPI		
	pleted operations. (Clearly state all poork). SEE RULE 1103. For Multip			
32.3#, H-40 ST&C set @ 528'. 1/1 celloflake, 2% CACL2. Drop plug	d w/ 12_1/4" bit @ 16:00hrs on 12/30/2010 RU cmt. Pre-flush w/ 20bbls F & displaced w/ 38bbls FW. Bump p 600#/30min @ 4:00hrs on 1/1/2010	FW. Pumped 417sx plug. Plug down @	(488cf-87bbls) Cl	ass G cmt w/ .25pps
Spud Date: 12/30/20	Nig Rele	eased Date:		DIST. 3
I hereby certify that the information	n above is true and complete to the be	est of my knowledge	e and belief.	
	_1			1.1.
SIGNATURE STORY		Regulatory Tech		1 1
Type or print name Crystal Tafo	<u>oya</u> E-mail address: <u>cry</u>	stal.tafoya@conocc	phillips.com PH	IONE: 505-326-9837
For State Use Only	Der Der	outy Oil & Gas	Inspector	JAN 0 6 2010
APPROVED BY: Tell G.	TITLE_		#3	DATE
Conditions of Approval (if any):		by		