Submit 3 Copies To Appropriate District	State of New Mexico		Form C-103	
Office District I	Energy, Minerals and Natural Resources			Jun 19, 2008
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
District II	OIL CONSERVATION DIVISION			045-29936
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.		5. Indicate Type of	
1000 Rio Brazos Rd., Aztec, NM 87410			STATE [	FEE 🛛
District IV	Santa Fe, NM 87505		6. State Oil & Gas	s Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505				
,	CES AND REPORTS ON WELLS		7. Lease Name or	Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		l '	saly Com	
	CATION FOR PERMIT" (FORM C-101) FOR SUC	CH		·
PROPOSALS.)  1. Type of Well: Oil Well Gas Well Other		8. Well Number#	2	
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			Leadville Form	
4. Well Location		•		
		1 0000	C (C 4	T . 1'
Unit Letter B : 1200		and2390		
Section 22		11W		Juan County
Print State of the	11. Elevation (Show whether DR, RKB,	RT, GR, etc.)		7.70
10.000 CC	5755' GR			244
12. Check A	Appropriate Box to Indicate Nature	of Notice,	Report or Other:	Data
NOTICE OF IN	TENTION TO	OL ID		2007.05
NOTICE OF IN			SEQUENT REF	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK			_	ALTERING CASING
TEMPORARILY ABANDON				P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	ING/CEMENT	ГЈОВ 🗌	
	0711	M. o		
OTHER:	leted operations. (Clearly state all pertine	ER: 🔯 Car	icei Deepening of ex	sisting SWD APVD 8-7-0
	ork). SEE RULE 1103. For Multiple Con			
or recompletion.	ik). SEE ROLE 1103. For Multiple Con	npienons. At	_	
of recompletion.			į	CVD MAR 3'10
				NL CONS. DIV.
				•
Burlington Resources Oil & Gas Ll	P has changed plans on the subject well ar	nd will be leav	ving the current cont	figuration as is. Please
cancel APD to deepen approved 8/7			ing the content con	
cancer in B to deepen approved of	, 65.		,	
Spud Date:	Rig Released	Date:		
I hereby certify that the information	above is true and complete to the best of a	my knowledge	e and belief. I furthe	r certify that any pit or below-
grade tank has been/will be constructed or	closed according to NMOCD guidelines □, a gen	neral permit 🖂	or an (attached) alterna	ative OCD-approved plan □.
SIGNATURE ATTACK	TITLE	Cu Damilatan	v Smaaialist DAT	E 2/1/10
SIGNATURE TUNY	My/M TITLE	SI. Regulator	y Specialist DAT	E3/1/10
Type or print name Dates Character	on E-mail address: clugspl@conocophi	illine com	PHONE: 505-326	5-0518
	n_E-mail address: clugspl@conocophi	mps.com	11101NL. 303-320	7-9310
For State Use Only	Danistic	Oil 9 God	Inencotor	
APPROVED BY:	TITLE	District	Inspector,	_ <sub>DATE</sub> MAR 0 3 2010
	- 41/ 111 LL	LUSTRICT	# <b>U</b>	
Conditions of Approval (if any):	$I^*$			