

District Office

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM

87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103

June 16, 2008

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. <b>3003920669</b>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator <b>BURLINGTON RESOURCES OIL GAS COMPANY, LP</b>		6. State Oil & Gas Lease No. <b>FEE</b>
3. Address of Operator <b>P.O. BOX 4289, FARMINGTON NM 87499</b>		7. Lease Name or Unit Agreement Name <b>SAN JUAN 28-6 UNIT</b>
4. Well Location Unit Letter <u>N</u> : <u>1180'</u> feet from the <u>FSL</u> line and <u>1500'</u> feet from the <u>FWL</u> line Section <u>13</u> Township <u>027N</u> Range <u>006W</u> NMPM <u>RIO ARRIBA</u> County <u>NM</u>		8. Well Number <u>179</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>6419' GR</b>		9. OGRID Number <u>14538</u>
		10. Pool name or Wildcat <b>BASIN DAKOTA / BLANCO MESAVERDE / CEREZA CANYON GALLUP</b>

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
 TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
 PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
 COMMENCE DRILLING OPNS. ☐ P AND A ☐  
 CASING/CEMENT JOB ☐

OTHER: **RE-DELIVERY 04/15/10** ☒

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.

This well was shut in due to logging off. It was re-delivered on 04/15/10 produced an initial MCF of 633.

TP: 960 CP: 950 Initial MCF: 633

RCVD JUN 23 '10

Meter No.: 87825

Gas Co.: EFS

OIL CONS. DIV.

Project Type: REDELIVERY

DIST. 3

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Tam Sessions TITLE Staff Regulatory Tech DATE 06/21/10

Type or print name Tamra Sessions E-mail address: sessitd@ConocoPhillips.com PHONE: 505-326-9834

**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval (if any):

A