

District I
PO Box 198C, Hobbs, NM 88241-1980

District II
P.O. Drawer DD, Artesia, NM 88211-0719

District III
1000 Rio Brazos Rd., Aztec, NM 87410

District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals, & Natural Resources Department

Form C-104
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

☐ AMMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator Name and Address Burlington Resources Oil & Gas PO Box 4289 Farmington, NM 87499		² OGRID Number 14538
		³ Reason for Filing Code CO - 7/11/96
⁴ API Number 30-045-7480	⁵ Pool Name AZTEC PICTURED CLIFFS (GAS)	⁶ Pool Code 71280
⁷ Property Code 007477	⁸ Property Name SANCHEZ A COM	⁹ Well Number #1

II. ¹⁰ Surface Location

¹⁰ UI or lot no. H	¹¹ Section 16	¹² Township 028N	¹³ Range 009W	¹⁴ Lot.Idr.	¹⁵ Feet from the 1650	¹⁶ North/South Line N	¹⁷ Feet from the 690	¹⁸ East/West Line E	¹⁹ County SAN JUAN
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¹¹ Bottom Hole Location

¹⁰ UI or lot no.	¹¹ Section	¹² Township	¹³ Range	¹⁴ Lot.Idr.	¹⁵ Feet from the	¹⁶ North/South Line	¹⁷ Feet from the	¹⁸ East/West Line	¹⁹ County		
¹² Use Code		¹³ Producing Method Code		¹⁴ Gas Connection Date		¹⁵ C-129 Permit Number		¹⁶ C-129 Effective Date		¹⁷ C-129 Expiration Date	

III. Oil and Gas Transporters

²⁰ Transporter OGRID 25244	¹⁹ Transporter Name and Address WILLIAMS FIELD SERVICES CO P.O. BOX 56900 SALT LAKE CITY, UT 84156-0900	²¹ POD	²² O/G G	²³ POD ULSTR Location and Description H-16-T028N-R009W

IV. Produced Water

²³ POD	²⁴ POD ULSTR Location and Description
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V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBTB	²⁹ Perforations
³⁰ Hole Size	³¹ Casing & Tubing Size		³² Depth Set	³³ Sacks Cement

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method

⁴⁶ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Dolores Diaz*

Printed Name:
Dolores Diaz
Title:
Production Associate

Date:
7/11/96
Phone:
(505) 326-9730

OIL CONSERVATION DIVISION

Approved by: Frank T. Chavez

Title: District Supervisor

Approved Date: July 11, 1996

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator
14538 Meridian Oil Production

Previous Operator Signature	Printed Name	Title	Date
Signature: <i>Dolores Diaz</i>	Dolores Diaz	Production Associate	7/11/96

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division


Sundry Notices and Reports on Wells

1. Type of Well GAS	API # (assigned by OCD) 30-045-07480
2. Name of Operator BURLINGTON RESOURCES OIL & GAS COMPANY	5. Lease Number
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700	6. State Oil&Gas Lease # E-2131-2
4. Location of Well, Footage, Sec., T, R, M 1650' FNL, 690' FEL, Sec.16, T-28-N, R-9-W, NMPM, San Juan County	7. Lease Name/Unit Name Sanchez A Com
	8. Well No. 1
	9. Pool Name or Wildcat Basin Fruitland Coal/ Aztec Pictured Cliffs
	10. Elevation:

Type of Submission	Type of Action
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input checked="" type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other - Commingle
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

It is intended to recomplete the subject well in the Fruitland Coal formation by setting a cast iron bridge plug at approximately 2570'. Pressure test the 3 1/2" casing. Run a compensated neutron log across the Fruitland Coal interval. Perforate at approximately 2400-2550'. Stimulate the perforations with linear gel and nitrogen foam. Flow the well back and clean up after stimulation. Drill out the cast iron bridge plug and clean out the well to total depth. Land 1 1/4" tubing at approximately 2650'. The well will then be down hole commingled. A down hole commingle application will be submitted.

SIGNATURE  (BSFTC3) Regulatory Supervisor February 6, 2002

no
(This space for State Use)

Approved by _____ Title _____ Date _____

FEB - 6 2002

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, 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 & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised August 15, 2000
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-045-07480		² Pool Code 71629/71280		³ Pool Name Basin Fruitland Coal/Aztec Pictured Cliffs	
⁴ Property Code 7477		⁵ Property Name Sanchez A Com			⁶ Well Number 1
⁷ OGRID No. 14538		⁸ Operator Name Burlington Resources Oil & Gas Company LP			⁹ Elevation 6488' KB

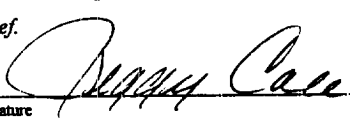
¹⁰ Surface Location

UL or lot no. H	Section 16	Township 28N	Range 9W	Lot Idn	Feet from the 1650'	North/South line North	Feet from the 690'	East/West line East	County San Juan
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
¹² Dedicated Acres FTC -- E/320 PC - 160		¹³ Joint or Infill		¹⁴ Consolidation Code		¹⁵ Order No.			

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

¹⁶				¹⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.  Signature Peggy Cole Printed Name Regulatory Supervisor Title 2-6-02 Date			
Original plat from Stephen H. Kinney 8-26-55				¹⁸ SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. Date of Survey Signature and Seal of Professional Surveyor: Certificate Number			