

Submit 3 Copies To Appropriate District
Office
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 and Natural Resources

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

Form C-103
Revised March 25, 1999

WELL API NO. 30-045-30853
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-10400-1
7. Lease Name or Unit Agreement Name: Atlantic D Com A
8. Well No. 2B
9. Pool name or Wildcat Blanco Mesaverde

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.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator Burlington Resources Oil & Gas Company	
3. Address of Operator PO Box 4289, Farmington, NM 87499	
4. Well Location Unit Letter <u>I</u> : 1735 feet from the <u>South</u> line and 660 feet from the <u>East</u> line Section <u>36</u> Township <u>31N</u> Range <u>12W 10</u> NMPM County <u>San Juan</u>	
10. Elevation (Show whether DR, RKB, RT, GR, etc.)	

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: Spud, casing, & cement <input checked="" type="checkbox"/>
12. 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. 9/24/02 (Verbal approval from Steve Hayden, OCD, to change intermediate TD to 3670'). MIRU. Spud well @ 5:00 pm 9/24/02. Drill to 150'. Circ hole clean. TOO. TIH w/3 jts 9-5/8" 32.3# H40 ST&C csg, set @ 144'. Cmdt w/146 sxs Type III w/2% calcium chloride, 0.25 pps celloflake (206 cu. ft.). WOC. 9/25/02 NU BOP. PT BOP & csg to 600 psi/30 mins, OK. Drilling ahead. APD ROW Related	

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

SIGNATURE Peggy Cole TITLE Regulatory Supervisor DATE 9/26/02

Type or print name Peggy Cole Telephone No. (505) 326-9700

(This space for State use)

APPROVED BY [Signature] TITLE [Signature] DATE [Signature]
Conditions of approval, if any: