

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. 30-045-30850
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 LP	
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>10W</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:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: 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 recompilation.

(9/27/02) Drill to intermediate TD @ 3692'. Circ hole clean. TOOH.

(9/28/02) TIH w/5 jts 7" 23# N80 LT&C csg, & 82 jts 7" 20# J-55 ST&C csg, set @ 3684'. Stage collar @ 2676'. Cmt'd 1st stage w/74 sxs Premium Lite w/3% calcium chloride, 0.25 pps celloflake, 5 pps LCM-1, 0.4% fluid loss, 0.4% sodium metasilicate (158 cu. ft.). Tail w/90 sxs Type 3 w/1% calcium chloride, 0.25 pps celloflake, 0.2% fluid loss (124 cu. ft.). Circ 20 bbls cmt to surface. Cmt'd 2nd stage w/364 sxs Premium Lite w/3% calcium chloride, 0.25 pps celloflake, 5 pps LCM-1, 0.4% fluid loss, 0.4% SMS (775 cu. ft.). Circ 48 bbls cmt to surface. WOC. PT BOP & csg to 1500 psi/30 mins, OK. Drilling ahead.

(10/1/02) Drill to TD @ 6065'. Circ hole clean. TOOH.

(10/2/02) TIH w/140 jts 4-1/2" 10.5# J-55 ST&C csg, set @ 6028'. Cmt'd w/200 sxs 65/35 Class B poz w/0.25 pps celloflake, 1% fluid loss, 0.3% CD-32, 6.25 pps LCM-1, 7 pps CSE (618 cu. ft.). ND BOP. NU WH. RD. Rig released.

A CBL will be ran at a later date to determine TOC.

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 10/14/02

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

(This space for SIGNATURE SIGNED BY CHARLIE T. PERAIN

DEPUTY OIL & GAS INSPECTOR. 10/14/02 OCT 16 2002

APPROVED BY _____ TITLE _____ DATE _____

Conditions of approval, if any: