

Submitted in lieu of Form 3160-5 (June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT" - for such proposals.

AMENDED: PRODUCING ZONE IS
MV ONLY AT THIS TIME

FORM APPROVED

Budget Bureau No. 1004-0135

Expires March 31, 1993

RECEIVED

AUG 04 2011

Farmington Field Office
Bureau of Land Management

1. Type of Well:

Gas

2. Name of Operator:

BURLINGTON RESOURCES OIL & GAS COMPANY LP

3. Address and Phone No. of Operator:

P. O. Box 4289, Farmington, NM 87499
(505) 326-9700

4. Location of Well, Footage, Sec. T, R, U:

FOOTAGE: 1335' FNL & 870' FEL

S: 29 T: 028N R: 004W U: H

5. Lease Number:

NM-03863

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name:

8. Well Name and Number:

SAN JUAN 28-4 UNIT 37

9. API Well No.

3003920673

10. Field and Pool:

DK - BASIN::DAKOTA

MV - BLANCO::MESAVERDE

11. County and State:

RIO ARRIBA, NM

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

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

13. Describe Proposed or Completed Operations

This well was re-delivered on 1/28/2011 and produced natural gas and entrained hydrocarbons.

Notes: THIS WELL WAS RECOMPLETED TO THE MESAVERDE CIBP WAS LEFT OVER THE DK UNTIL REMEDIAL WORK CAN BE DONE TO ISOLATE WATER ZONE. PRODUCING AS A MV ONLY AT THIS TIME.

TP: 270

CP: 970

Initial MCF: 770

Meter No.: 87950

Gas Co.: ENT

Proj Type.: RECOMPLETE



14. I Hereby certify that the foregoing is true and correct.

Signed

Tamra Sessions
Tamra Sessions

Title: Staff Regulatory Tech.

Date: 8/4/2011

ACCEPTED FOR RECORD

AUG 08 2011

(This Space for Federal or State Office Use)

APPROVED BY:

Title:

Date: FARMINGTON FIELD OFFICE

CONDITION OF APPROVAL, if any:

NMOCDA