

RECEIVED

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.

FORM APPROVED

Budget Bureau No. 1004-0135
Expires: March 31, 1993
Farmington Field Office
Bureau of Land Management

JAN 16 2013

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: 1020' FNL & 1780' FWL

S: 21 T: 026N R: 007W U: C

5. Lease Number:

NM-93252

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name:

8. Well Name and Number:

SOONER 1E

9. API Well No.

3003931029

10. Field and Pool:

DK - BASIN::DAKOTA

MC - BASIN::MANCOS

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 1/7/2013 and produced natural gas and entrained hydrocarbons.

Notes: CIBP HAS BEEN REMOVED FROM OVER THE DK. STARTED SELLING ON THE MC & DK 01/07/13. FINISHED THE GAS RECOVERY COMPLETION 01/11/13. WELL IS NOW PRODUCING AS A MC/DK DOWN HOLE COMMINGLE.

TP: CP: Initial MCF: 4329

OIL CONS. DIV DIST. 3

Meter No.: 91044

JAN 30 2013

Gas Co.: ENT

Proj Type.: GAS RECOVERY COMPLETION

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

Signed Tamra Sessions
Tamra Sessions

Title: Staff Regulatory Tech.

Date: 1/14/2013

ACCEPTED FOR RECORD

(This Space for Federal or State Office Use)

JAN 17 2013

APPROVED BY: _____

Title: _____

Date: _____
FARMINGTON FIELD OFFICE

CONDITION OF APPROVAL, if any: _____

NMOCDCa