## submitted in lieu of Form 3160-5 UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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# FEB 23 2012

	Sundry Notices and Reports on Wells		Farmington Field Office Bureau of Land Managemen
		5.	Lease Number SF-078459-B
1.	Type of Well GAS	6.	If Indian, All. or Tribe Name
2.	Name of Operator	7.	Unit Agreement Name Allison Unit
	BURLINGTON RESOURCES OIL & GAS COMPANY LP	8.	Well Name & Number
3.	Address & Phone No. of Operator	0.	Allison Unit 123S
	PO Box 4289, Farmington, NM 87499 (505) 326-9700	9.	API Well No.
4.	Location of Well, Footage, Sec., T, R, M	10	30-045-34955
	Surface: Unit K (NESW), 2410' FSL & 2500' FWL, Section 9, T32N, R7W, NMPM	10.	Field and Pool Basin Fruitland Coal
	Bottomhole: Unit C (NENW), 464' FNL & 2488' FWL, Section 10, T32N, R7W, NMPM	11.	County and State San Juan, NM

#### 12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission Type of Action Nation of Lease of Discourses of

Ν	Jotice of Intent	Abandonment	Change of Plans	Х	Other -	FAN	
		Recompletion	New Construction				
S	Subsequent Report	Plugging	Non-Routine Fracturing		RCVD MAY 30 '13		
		Casing Repair	Water Shut off		OIL.	CONS. DIV.	
X F	Final Abandonment	Altering Casing	Conversion to Injection			DIST. 3	
			-			0101.0	

### 13. Describe Proposed or Completed Operations

The subject well was P&A'd on 10/16/2009. Reclamation was completed and the location is now ready for final closure approval. Please remove this well from Burlington Resources Oil & Gas Company, LP bond.

# 14. I hereby certify that the foregoing is true and correct.

Signed Stal Tapaja	Crystal Tafoya	Title: Staff Regulatory T	<u> Fechnician</u>	Date <u>22</u> 3
(This space for Federal or State Office use) APPROVED BY CONDITION OF APPROVAL, if any: The la USC Section 1001 makes it a crime for any person knowingly and willfully to	-Title COMP	IVIRONMENTAL LIANCE TEAM LEAD	_ Date _	MAY 29 2013

the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

