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

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: 1620' FSL & 1525' FEL

S: 19 T: 029N R: 011W U: J

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

MAY 21 2013

RECEIVED

Farmington Field Office Bureau of Land Managemen

5. Lease Number:

SF077056

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name: NMN/M-73725 8. Well Name and Number:

COZZENS B 1E

9. API Well No.

3004523935

10. Field and Pool: DK - BASIN::DAKOTA RCVD JUN 10 '13 OIL CONS. DIV. DIST. 3

11. County and State: SAN JUAN, NM

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

Notice of Intent	Recompletion	Change of Plans
X Subsequent Report	Plugging Back	New Construction
Final Abandonment	Casing Repair	Non-Routine Fracturing
Abandonment	Altering Casing	Water Shut Off
	X Other- Re-Delivery	Conversion to Injection

13. Describe Proposed or Completed Operations

This well was re-delivered on 5/15/2013 and produced natural gas and entrained hydrocarbons.

Notes: REDELIVERED WELL SHUT IN FOR MORE THAN 90 DAYS DUE TO ISSUES WITH THE PRODUCTION TANK

T P : 280		CP : 340
Meter No.:	34899	
Gas Co.:	WFC	

Initial MCF: 237

Proj Type.: REDELIVERY

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

Signed Siller	Title: Staff Regu	ulatory Tech. Date: 5/20/2013
This Space for Federal or State Office Use)		ACCEPTED FOR RECORD
APPROVED BY:	Title:	Date:/ 2 1 2011
CONDITION OF APPROVAL, if any:		FARMINGTON FIELD OFFICE
Title 18 U.S.C. Section 1001, makes it a crime fo United States any false, fictitious or fraudulent sta		illfully to make to any department or agency of the

