

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

AUG 06 2013

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No.

SF-078423

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well

☐ Oil Well

☒ Gas Well

☐ Other

7. If Unit of CA/Agreement, Name and/or No.

San Juan 29-7 Unit

8. Well Name and No.

San Juan 29-7 Unit 44E

2. Name of Operator

Burlington Resources Oil & Gas Company LP

9. API Well No.

30-039-29963

3a. Address

PO Box 4289, Farmington, NM 87499

3b. Phone No. (include area code)

(505) 326-9700

10. Field and Pool or Exploratory Area

Basin DK

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Surface UL: B (NWNE), 535' FNL & 2115' FEL, Sec. 17, T29N, R7W

11. Country or Parish, State

Rio Arriba New Mexico

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION

TYPE OF ACTION

☐ Notice of Intent

☒ Subsequent Report

☐ Final Abandonment Notice

☐ Acidize

☐ Alter Casing

☐ Casing Repair

☐ Change Plans

☐ Convert to Injection

☐ Deepen

☐ Fracture Treat

☐ New Construction

☐ Plug and Abandon

☐ Plug Back

☐ Production (Start/Resume)

☐ Reclamation

☐ Recomplete

☐ Temporarily Abandon

☐ Water Disposal

☐ Water Shut-Off

☐ Well Integrity

☒ Other Legacy

Reclamation

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 must be filed once Testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Burlington Resources Oil & Gas Company LP completed the Legacy Reclamation of the Location on 7/15/13, as requested by Mike Flaniken during the onsite inspection. Please schedule a field inspection to verify Burlington Resources has met the BLM requirements on this reclamation work.

OIL CONS. DIV DIST. 3

OCT 29 2013

ACCEPTED FOR RECORD

OCT 25 2013

FARMINGTON FIELD OFFICE

BY

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

Kenny Davis

Title

STAFF REGULATORY TECHNICIAN

Signature

Date

8/2/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instruction on page 2)

NMOC
ca

dib



Legacy

Reclamation Form:

Date: 7-31-13

Well Name: SJ 29-7 44E

Footages: 535 FNL, 2115 FEL Unit Letter: B

Section: 17, T-29-N, R-7-W, County: RA State: NM

Reclamation Contractor: Aztec

Reclamation Start Date: 7-15-2013

Reclamation Complete Date: 7-15-2013

Road Completion Date: 7-15-2013

Seeding Date: 7-17-2013

****PIT MARKER STATUS (When Required):** Picture of Marker set needed

MARKER PLACED : _____ (DATE)

LATITUDE: _____

LONGITUDE: _____

Pit Manifold removed _____ (DATE)

Construction Inspector: Norman Faver Date: 7-31-13

Inspector Signature: Norman Faver

Office Use Only: Subtask _____ DSM _____ Folder _____ Pictures _____

Revised 6/14/2012

SS 29-7 44E

