

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

2006 JAN 4 PM 2 16

1. Type of Well
GAS

2. Name of Operator

BURLINGTON

RESOURCES OIL & GAS COMPANY

3. Address & Phone No. of Operator

PO Box 4289, Farmington, NM 87499 (505) 326-9700

4. Location of Well, Footage, Sec., T, R, M

1645' FNL, 1785' 'FEL, Sec. 12, T30N, R10W, NMPM

5. Lease Number

NMSF-078200-A

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

Well Name & Number

Grambling C #3M

API Well No.

30-045-33306

10. Field and Pool

Blanco MV/Basin DK

11. County and State

San Juan County, NM

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

Type of Submission

☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment

Type of Action

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other - Casing
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut off
☐ Conversion to Injection

13. Describe Proposed or Completed Operations

12/30/05 Drill to intermediate TD @ 3354'. Circ hole clean. TOOH.
TIH w/78 jts 7" 20# J-55 ST&C csg set @ 3344'. Cmdt w/19 sxs Premium Lite cmt w/.25 pps celloflake, 3% calcium chloride, 5 pps LCM-1, 0.4% SMS, 0.4% fluid loss (57 cu ft). Lead w/376 sxs Premium Lite cmt w/.25 celloflake, 3% calcium chloride, 5 pps LCM-1, 0.4% SMS, .4% fluid loss (801 cu ft). Tail w/90 sxs Type III cmt w/1% calcium chloride, .25 pps celloflake, .2% fluid loss (124 cu ft). Displace w/134 bbls wtr. Circ 48 bbls cmt to surface. WOC.

12/31/05 PT BOP & csg to 1500 psi/30 min. OK. Drilling ahead.

1/2/06 Drill to TD @ 7685'. Blow well clean. TOOH.

TIH w/180 jts 4 1/2" 10.5# J-55 8rd ST&C csg set @ 7684'. Cmdt w/9 sxs Premium Lite cmt w/0.3% CD-32, .25 pps celloflake, 6.25 LCM-1, 1.0% fluid loss (28 cu ft).

Tail w/309 sxs Premium Lite H.S. cmt w/.25 pps celloflake, 0.3% CD-32, 6.25 pps LCM-1, 1% fluid loss (612 cu ft). Displace w/122 bbls wtr. ND BOP. NU WH.

1/3/06 RD. Rig released.

PT will be done upon completion

- Indicate TOC for the 4 1/2" casing on the next report

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

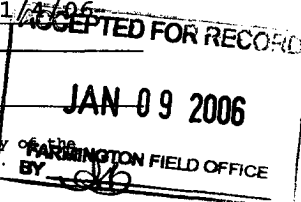
Signed Joni Clark Title Regulatory Specialist Date 1/4/06

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

Title 18 U.S.C. Section 1001, makes 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.



NMOCD