

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OIL CONS. DIV DIST. 3

OCT 19 2015

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

RECEIVED

OCT 13 2015

Farmington Field Office
Bureau of Land Management

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: 1410' FNL & 2570' FEL

S: 27 T: 028N R: 006W U: G

5. Lease Number:

SF-079050-C

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name:

NMNM-78412C-DK NMNM-78412A-MV

8. Well Name and Number:

SAN JUAN 28-6 UNIT 149N

9. API Well No.

3003929270

10. Field and Pool:

DK - BASIN::DAKOTA

MV - BLANCO::MESAVERDE

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 8/7/2015 and produced natural gas and entrained hydrocarbons.

Notes: WELL SHUT-IN FOR MORE THAN 90 DAYS DUE TO TANK REPAIR.

TP: 279

CP: 279

Initial MCF: 1408

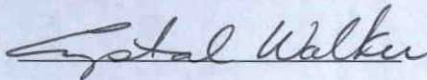
Meter No.: 83797

Gas Co.: WFC

Proj Type.: REDELIVERY

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

Signed



Title: Staff Regulatory Tech.

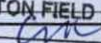
Date: 10/7/2015

ACCEPTED FOR RECORD

(This Space for Federal or State Office Use)

APPROVED BY: _____

Title: _____

OCT 14 2015
Date: _____
FARMINGTON FIELD OFFICE
BY: 

CONDITION OF APPROVAL, if any: _____

NMOCD

XC