

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.

RECEIVED

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

MAR 23 2017

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: 755' FSL & 1900' FWL

S: 18 T: 029N R: 007W U: N

OIL CONS. DIV DIST. 3
MAR 27 2017

5. Lease Number:

SF-079514

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name:

8. Well Name and Number:

SAN JUAN 29-7 UNIT 76B

9. API Well No.

3003926147

10. Field and Pool:

MV - BLANCO::MESAVERDE

11. County and State:

RIO ARRIBA, NM

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

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

13. Describe Proposed or Completed Operations

This well was re-delivered on 3/14/2017 and produced natural gas and entrained hydrocarbons.

Notes: REDELIVERED / SHUT IN FOR MORE THAN 90 DAYS DUE TO TBG REPAIR / RETURNED TO PRODUCTION

ACCEPTED FOR RECORD

TP: 164

CP: 173

Initial MCF: 384

Meter No.: 99729

Gas Co.: ENT

Proj Type.: REDELIVERY

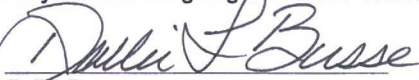
MAR 23 2017

FARMINGTON FIELD OFFICE

BY: William Tambekau

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

Signed


Dottie Busse

Title: Staff Regulatory Tech.

Date: 3/22/2017

(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.

NMOCDPV