

RECEIVED

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

JUL 15 2010

Sundry Notices and Reports on Wells

Farmington Field Office
Bureau of Land Management

- | | |
|--|---|
| <p>1. Type of Well
GAS</p> <p>2. Name of Operator
BURLINGTON
RESOURCES OIL & GAS COMPANY LP</p> <p>3. Address & Phone No. of Operator

PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <p>4. Location of Well, Footage, Sec., T, R, M

Surface: Unit N (SESW), 695' FSL & 1985' FWL, Section 5, T31N, R12W, NMPM</p> | <p>5. Lease Number
NM-019413</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name
Mitchell</p> <p>8. Well Name & Number
2</p> <p>9. API Well No.

30-045-35178</p> <p>10. Field and Pool
Blanco PC</p> <p>11. County and State
San Juan, NM</p> |
|--|---|

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

Type of Submission	Type of Action	Other —
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input checked="" type="checkbox"/> Rescind APD
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging	
	<input type="checkbox"/> Casing Repair	
	<input type="checkbox"/> Altering Casing	
	<input type="checkbox"/> Change of Plans	
	<input type="checkbox"/> New Construction	
	<input type="checkbox"/> Non-Routine Fracturing	
	<input type="checkbox"/> Water Shut off	
	<input type="checkbox"/> Conversion to Injection	

**RCVD JUL 27 '10
OIL CONS. DIV.
DIST. 3**

13. Describe Proposed or Completed Operations

Burlington Resources wishes to rescind the APD for the subject well that was filed 6/29/2010.

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

Signed *Dollie L. Busse* Dollie L. Busse Title Staff Regulatory Technician Date 7-14-10

(This space for Federal or State Office use)

APPROVED BY *Cynthia Marquez* Title IDE Date 7-26-10

CONDITION OF APPROVAL, if any:

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

NMOCD*✓**PC*