

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

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| <p>1. Type of Well
GAS</p> <hr/> <p>2. Name of Operator
BURLINGTON
RESOURCES OIL & GAS COMPANY</p> <hr/> <p>3. Address & Phone No. of Operator
PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec., T, R, M
A 1090' FNL, 990' FEL Sec. 7, T-27-N, R-5-W, NMPM</p> | <p>5. Lease Number
SF-079391</p> <p>6. If Indian, All. or
Tribe Name</p> <p>7. Unit Agreement Name</p> <p>San Juan 27-5 Unit</p> <p>8. Well Name & Number
San Juan 27-5 U #69</p> <p>9. API Well No.
30-039-07139</p> <p>10. Field and Pool
Blanco MV/Basin DK</p> <p>11. County and State
Rio Arriba Co, NM</p> |
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12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

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

13. Describe Proposed or Completed Operations

Please cancel the intent to add pay to the subject well approved as of 2/23/96.

RECEIVED
JUL - 1 1997
BUREAU OF LAND MANAGEMENT
FBI

JUL 20 1997
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14. I hereby certify that the foregoing is true and correct.

Signed *Deane W. Spencer* (LLL8) Title Regulatory Administrator Date 6/19/97

(This space for Federal or State Office use)

APPROVED BY *RS/ Deane W. Spencer* Title _____ Date JUL - 1 1997

CONDITION OF APPROVAL, if any:

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NMOCD