

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
BLM

Sundry Notices and Reports on Wells

99 APR 26 PM 2:59

1. Type of Well
GAS

070 APR 26 PM 6:00

5. Lease Number
SF-080669
If Indian, All. or
Tribe Name

2. Name of Operator

**BURLINGTON
RESOURCES**

OIL & GAS COMPANY

7. Unit Agreement Name

3. Address & Phone No. of Operator

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

RECEIVED
MAY - 3 1999

San Juan 27-4 Unit
Well Name & Number
San Juan 27-4 U #45
API Well No.
89-039-20118

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

1035' FNL, 900' FEL, Sec. 19, T-27-N, R-4-W, NMPM

OIL CON. DIV.
DIST. 3

10. Field and Pool
Blanco MV/Basin DK
11. County and State
Rio Arriba Co, 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 - Commingle
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut off
☐ Conversion to Injection

13. Describe Proposed or Completed Operations

It is intended to recomplete the Mesaverde formation in the subject well as follows:

MIRU, ND WH, NU BOP and pull the production tubing. A CIBP will be set at approximately 6420' above the Dakota formation. The Mesaverde will be perforated and fracture stimulated in the following intervals: 4280-4859', 5083-5608', 5684-6318'. After stimulation flowback, the CIBP above the Dakota formation will be drilled out and tubing landed at approximately 8068. The well will then be commingled. DHC-2317 has been received.

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

Signed /s/ Duane W. Spencer Title Regulatory Administrator Date 4/26/99
no

(This space for Federal or State Office use)

APPROVED BY /s/ Duane W. Spencer Title Team Lead, Petroleum Management Date APR 30 1999
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.

NMOC

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-
Revised February 21, 19
Instructions on b
Submit to Appropriate District Off
State Lease - 4 Cop
Fee Lease - 3 Cop

10/17/86 PM 2:59 ☐ AMENDED REPO

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ APT Number	¹ Pool Code	¹ Pool Name
30-039-20118	72319/71599	Blanco Mesaverde/Basin Dakota
⁴ Property Code	⁴ Property Name	⁴ Well Number
7452	San Juan 27-4 Unit	45
⁷ OGRID No.	⁷ Operator Name	⁷ Elevation
14538	Burlington Resources Oil & Gas Company	6820 GR

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
A	19	27N	4W		1035	North	900	East	RA

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

¹² Dedicated Acres	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
MV-E/320 DK-E/320			

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

¹⁶	¹⁷ OPERATOR CERTIFICATION
Original plat from David O. Vilven 7-9-68	I hereby certify that the information contained herein is true and complete to the best of my knowledge and bel.
	Signature Peggy Bradfield Printed Name Regulatory Administrator Title Date
	¹⁸ SURVEYOR CERTIFICATION
	I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by or under my supervision, and that the same is true and correct to the best of my belief.
	Date of Survey Signature and Seal of Professional Surveyer:
	Certificate Number

OK