

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)

FOR APPROVED
OMB NO. 1004-0137

Expires: December 31, 1991

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other ☐		5. LEASE DESIGNATION AND SERIAL NO. SF-080669	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR ☒ Other ☐		7. UNIT AGREEMENT NAME San Juan 27-4 Unit	
2. NAME OF OPERATOR BURLINGTON RESOURCES OIL & GAS COMPANY		8. FARM OR LEASE NAME, WELL NO. San Juan 27-4 Unit #45	
3. ADDRESS AND TELEPHONE NO. PO Box 4289, Farmington, NM 87499 (505) 326-9700		9. API WELL NO. 30-039-20118	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 1035'FNL, 900'FEL At top prod. interval reported below At total depth DHC-2317		10. FIELD AND POOL, OR WILDCAT Blanco MV/Basin DK	
14. PERMIT NO. DATE ISSUED		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA A Sec. 19, T-27-N, R-4-W	
15. DATE SPUNDED 7-10-68		12. COUNTY OR PARISH Rio Arriba	
16. DATE T.D. REACHED 7-23-68		13. STATE New Mexico	
17. DATE COMPL. (Ready to prod.) 9-20-99		19. ELEV. CASINGHEAD	
18. ELEVATIONS (DF, RK3, RT, BR, ETC.)* 6820 GR		20. TOTAL DEPTH, MD & TVD 8155	
21. PLUG, BACK T.D., MD & TVD 8118		22. IF MULTIPLE COMPL., HOW MANY* 2	
23. INTERVALS DRILLED BY		24. PRODUCTION INTERVAL (S) OF THIS COMPLETION-TOP, BOTTOM, NAME (MD AND TVD)* 4490-6318 Mesaverde Commingled w/Dakota	
25. WAS DIRECTIONAL SURVEY MADE		26. TYPE ELECTRIC AND OTHER LOGS RUN CBL, GR	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) 4490-4499', 4650-4659', 4700-4709', 4850-4859', 5083-5608', 5684-6016', 6173-6318'		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED 4490-4859 24,500 gal 20# linear gel, 85,000# 20/40 Brady sd 5083-5608 104,000 gal slk wtr, 100,000# 20/40 Brady sd 5684-6318 103,200 gal slk wtr, 100,000# 20/40 Brady sd	
33. PRODUCTION DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing DATE OF TEST 9-20-99 HOURS TESTED CHOKE SIZE PROD'N FOR TEST PERIOD OIL-BBL GAS-MCF WATER-BBL SI 818 SI 821 1241 Pitot Gauge FLOW, TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE OIL-BBL GAS-MCF WATER-BBL SI 818 SI 821 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To be sold 35. LIST OF ATTACHMENTS None		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	

ACCEPTED FOR RECORD

NOV 02 1999

SIGNED Nancy Oltmanns TITLE Regulatory Administrator

DATE 9-28-99

*(See Instructions and Spaces for Additional Data on Reverse Side)

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 or representations as to any matter within its jurisdiction.

NMOCD

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. **Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), at least in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s), and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

FORMATION		TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	FEET VERT. DEPTH	WELL COMPLETION OR RECOMPLETION REPORT
37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES								
					Pictured Cliffs	3713		
					Mesa Verde	5373		
					Point Lookout	5890		
					Callup	6850		
					Greenhorn	7793		
					Graneros	7854		
					Dakota	8006		