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

| Sundry Notices  | and Reports on Wel                    | ls                    |  |
|---|---------------------------------------|-----------------------|--|
|   |                                       | , 5.                  | Lease Number<br>SF-079367B   |
| 1. Type of Well<br>GAS                                    |                                       | 6.                    | If Indian, All. or Tribe Name  |
|   |                                       | 7.                    | Unit Agreement Name  |
| 2. Name of Operator                                       |                                       |                       |  |
| BURLINGTON<br>RESOURCES                                   |                                       |                       | Con Turn 20 C Unit   |
| RESOURCES OIL & GAS COMPANY                               |                                       | 8.                    | San Juan 28-6 Unit Well Name & Number  |
| 3. Address & Phone No. of Operator                        |                                       | •                     | San Juan 28-6 U #20  |
| PO Box 4289, Farmington, NM 87499 (505) 326-9700          |                                       | 9.                    | <b>API Well No.</b> 30-039-20989   |
| 4. Location of Well, Footage, Sec., T, R, M               |                                       | 10.                   | Field and Pool   |
| 1710'FSL, 1760'FEL, Sec.25, T-27-N, R-6-W, NMPM           |                                       | 11.                   | So.Blanco Pict.Clif County and State   |
|   |                                       |                       | Rio Arriba Co, NM  |
| 12. CHECK APPROPRIATE BOX TO INDICAT                      |                                       |                       | DATA   |
| Type of Submission  | Type of Ad                            | ction<br>Change of Pl | 220  |
|   | Abandonment _ Recompletion            | New Construc          | tion   |
| Subsequent Report   | Plugging Back                         | Non-Routine           | Fracturing   |
| Final Abandonment   | Casing Repair Altering Casing         | Water Shut o          | II<br>o Injection  |
| IIIIaI Abandonmene  | Other -                               |                       | 211.70002011   |
| 12 Provide Provide Government                             | l Omamatiana                          |                       | <del></del>  |
| 13. Describe Proposed or Completed                        | Operations                            |                       |  |
| Is it intended to plug and aba<br>be submitted by 3-10-99 |                                       | well. A detailed      | procedure will   |
|   |                                       |                       |  |
|   |                                       |                       | rocke.<br>Geografia  |
|   |                                       |                       |  |
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|   |                                       | £ -273.4              | . The second sec |
|   |                                       | CALLES BIVS           |  |
|   |                                       | 6.0.3                 |  |
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| 14. I hereby certify that the fore                        | egoing is true and                    | correct.              |  |
| Signed /All Deale pur (F                                  | (LM3)Title Regulat                    | ory Administrato      | r_Date 2/24/99   |
| (This space for Federal or State Off APPROVED BY          | fice use)<br>Title                    | Date                  |  |
| CONDITION OF APPROVAL, if any:                            |                                       | • •                   | CCEPTED FOR RECORI   |
| Title 18 U.S.C. Section 1001, makes it a crim             | me for any person know.               | ingly and willfully   | to make any department   |

NMOCD

FARMINGTON FIELD OFFICE BY\_\_\_\_\_