

submitted in lieu of Form 3160-5

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well  
GAS
2. Name of Operator  
**BURLINGTON**  
**RESOURCES** OIL & GAS COMPANY
3. Address & Phone No. of Operator  
PO Box 4289, Farmington, NM 87499 (505) 326-9700
4. Location of Well, Footage, Sec., T, R, M  
1850' FNL, 1650' FEL, Sec. 5, T-27-N, R-8-W, NMPM
5. Lease Number  
SF-078461
6. If Indian, All. or  
Tribe Name
7. Unit Agreement Name
8. Well Name & Number  
Filan #6
9. API Well No.  
30-045-20355
10. Field and Pool  
Basin Dakota
11. County and State  
San Juan Co, NM

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

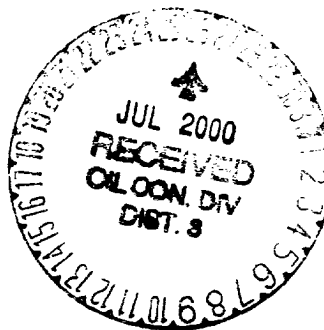
Type of Submission

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 - |  |

13. Describe Proposed or Completed Operations

It is intended to evaluate this wellbore for uphole potential in the Mesaverde formation and recomplete it by the 3rd quarter 2001.



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

Signed Reggie Cole Title Regulatory Supervisor Date 7/14/00  
TLW

(This space for Federal or State Office use)

APPROVED BY \_\_\_\_\_ Title \_\_\_\_\_ Date 7/24/00

CONDITION OF APPROVAL, if any:

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.

NMOCB