

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
1190' FNL, 790' FWL, Sec. 28, T-28-N, R-5-W, NMPM
5. Lease Number
SF-079521A
6. If Indian, All. or Tribe Name
7. Unit Agreement Name
8. Well Name & Number
San Juan 28-5 Unit
9. API Well No.
San Juan 28-5 U #64M
10. Field and Pool
30-039-25589
11. County and State
Blanco MV/Basin DK
Rio Arriba Co, NM

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

Type of Submission

Type of Action

- | | | |
|---|---|--|
| ☐ Notice of Intent | ☐ Abandonment | ☐ Change of Plans |
| ☒ Subsequent Report | ☐ Recompletion | ☐ New Construction |
| ☐ Final Abandonment | ☐ Plugging Back | ☐ Non-Routine Fracturing |
| | ☐ Casing Repair | ☐ Water Shut off |
| | ☐ Altering Casing | ☐ Conversion to Injection |
| | ☒ Other - | |

13. Describe Proposed or Completed Operations

- 10-17-96 Drill to intermediate TD @ 3841'. Circ hole clean. TOOH. TIH w/86 jts 7" 20# K-55 ST&C csg, set @ 3833'. Pump 5 bbl wtr, 10 bbl calcium chloride wtr, 5 bbl wtr, 10 bbl super flush, 5 bbl wtr ahead. Cmt d w/313 sx Class "B" neat cmt w/3% extender, 0.5 pps Flocele, 10 pps Gilsonite (901 cu.ft.). Tailed w/90 sx Class "B" 50/50 poz w/2% calcium chloride, 10 pps Gilsonite (110 cu.ft.). Circ 30 bbl cmt to surface. WOC. PT csg to 1500 psi, OK. Circ hole clean. Drilling ahead.
- 10-21-96 Drill to TD @ 7972'. Circ hole clean. TOOH. TIH w/159 jts 4 1/2" 11.6# K-55 LT&C csg & 29 jts 4 1/2" 10.5# K-55 ST&C csg, set @ 7968'.
- 10-22-96 Pump 20 bbl chemical wash, 20 bbl gel wtr, 10 bbl wtr. Cmt d w/102 sx Class "B" 65/35 poz w/6% gel, 0.25 pps Flocele, 5 pps Gilsonite (189 cu.ft.). Tailed w/288 sx Class "B" 50/50 poz w/0.25 pps Flocele, 5 pps Gilsonite, 0.3% fluid loss (383 cu.ft.). Displace w/126 bbl wtr. WOC. PT csg to 3800 psi, OK. ND BOP. NU WH. RD. Rig released.

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

Signed [Signature] Title Regulatory Administrator Date 10/23/96

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

Date _____

CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

OCT 25 1996

NMCO

FARMINGTON DISTRICT OFFICE

BY [Signature]