

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

- | | |
|---|---|
| <p>1. Type of Well
GAS</p> <hr/> <p>2. Name of Operator
BURLINGTON RESOURCES
OIL & GAS COMPANY</p> <hr/> <p>3. Address & Phone No. of Operator
PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec., T, R, M
790' FNL, 790' FWL, Sec.25, T-27-N, R-9-W, NMPM</p> | <p>5. Lease Number
I-149-IND-8473</p> <p>6. If Indian, All. or Tribe Name
Navajo</p> <p>7. Unit Agreement Name
Huerfanito Unit</p> <p>8. Well Name & Number
Huerfanito Unit #93</p> <p>9. API Well No.
30-045-13365</p> <p>10. Field and Pool
Basin Fruitland Coal/
So. Blanco Pict. Cliffs</p> <p>11. County and State
San Juan Co, NM</p> |
|---|---|

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

Type of Submission	Type of Action	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" 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

The subject well is producing from the Basin Fruitland Coal. The Pictured Cliffs is temporarily abandoned. Average production for January, 1997 is 143 MCFD. Average production for February, 1997 is 129 MCFD.

RECEIVED
APR 14 1997

OIL CON. DIV.
DIST. 3

OIL CON. DIV.
DIST. 3
APR 15 1997 9:20

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

Signed *Regina Brummitt* (PMP1) Title Regulatory Administrator Date 4/9/97

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

CONDITION OF APPROVAL, if any:

ACCEPTED **SECOND**
Date _____

APR 10 1997

FARMINGTON DISTRICT OFFICE

BY *SW*

NMOOD