

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

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| <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, 1755' FWL, Sec.25, T-28-N, R-11-W, NMPM</p> | <p>5. Lease Number
SF-047017B</p> <p>6. If Indian, All. or
Tribe Name</p> <p>7. Unit Agreement Name</p>
<p>8. Well Name & Number
Delo #3</p> <p>9. API Well No.
30-045-20929</p> <p>10. Field and Pool
Fulcher Kutz Pict.Clfs</p> <p>11. County and State
San Juan Co, NM</p> |
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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 checked="" 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 type="checkbox"/> Other -	

13. Describe Proposed or Completed Operations

It is intended to repair the casing leaks in the subject well by locating the leaks. The well will then be cemented and cement will be circulated to surface. The casing will then be pressure tested.

(Verbal approval to repair from Wayne Townsend, BLM on 5-18-98)

RECEIVED
MAY 22 1998

OIL CON. DIV.
DIST. 3

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

Signed *John J. Snodgrass* Title Regulatory Administrator Date 5/18/98

(This space for Federal or State Office use)

APPROVED BY */s/ Duane W. Spencer* Title _____ Date MAY 20 1998

CONDITION OF APPROVAL, if any: