

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 <b>BURLINGTON RESOURCES</b> OIL &amp; GAS COMPANY</p> <hr/> <p>3. Address &amp; 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 1605' FNL, 1040' FWL, Sec. 25, T-29-N, R-7-W, NMPM DHC-1444</p>	<p>5. Lease Number SF-078425</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name  San Juan 29-7 Unit</p> <p>8. Well Name &amp; Number San Juan 29-7 U #138</p> <p>9. API Well No. 30-039-24149</p> <p>10. Field and Pool Blanco MV/Basin DK</p> <p>11. County and State Rio Arriba 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 - Tubing change	

13. Describe Proposed or Completed Operations

4-11-97 MIRU. SDON.  
 4-12-97 ND WH. NU BOP. TOOH w/114 jts 1 1/2" tbg. SDON.  
 4-13-97 TOOH w/121 jts 1 1/2" tbg. TIH, blow well & CO. SDON.  
 4-14-97 Blow well & CO. TOOH. TIH w/257 jts 2 3/8" 4.7# J-55 8RD SUE Rig, landed  
 @ 7992'. ND BOP. NU WH. RD. Rig released.

OIL FIELD, NM  
MAY -6 PM 1:28

RECEIVED  
MAY 11 1997  
OIL FIELD, NM  
BUREAU

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

Signed *Regina Sanchez* Title Regulatory Administrator Date 5/5/97

(This space for Federal or State Office use)

APPROVED BY \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

CONDITION OF APPROVAL, if any:

**ACCEPTED FOR RECORD**

MAY 07 1997