

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

1500' FSL, 1850' FWL, Sec. 5, T-29-N, R-7-W, NMPM

5. Lease Number
SF-078951

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

San Juan 29-7 Unit

8. Well Name & Number

San Juan 29-7 U #79B

9. API Well No.

30-039-26222

10. Field and Pool

Blanco MV/Basin DK

11. County and State

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

4-8-00 Drill to intermediate TD @ 3220'.

4-9-00 Circ hole clean. TOOH. TIH w/78 jts 8 5/8" 32# J-55 ST&C csg, set @ 3214'.
Pump 20 bbl wtr, 20 bbl mud flush, 20 bbl wtr ahead. Cmt'd w/549 sx
Class "B" neat cmt w/6% gel, 0.25 pps Cellophane, 5 pps Gilsonite, 2%
calcium chloride, 0.1% retardant (1647 cu.ft.). Tailed w/90 sx Class "B"
neat cmt w/2% calcium chloride, 5 pps Gilsonite, 0.25 pps Cellophane,
2% extender, 0.1% retardant (154 cu.ft.). Displace w/196 bbl wtr. Circ
20 bbl cmt to surface. WOC.

4-10-00 PT BOP & csg to 1500 psi/30 min, OK. Drilling ahead.

4-12-00 Drill to TD @ 7425'. Circ hole clean. TOOH. TIH, ran logs.

4-13-00 TOOH. TIH w/175 jts 5 1/2" 15.5# K-55 LT&C csg, set @ 7422'. Pump 20 bbl
20 bbl chemical wash, 20 bbl wtr ahead. Cmt'd w/557 sx Class "B"
50/50 poz w/2.75% gel, 0.25 pps Cellophane, 5 pps Gilsonite, 0.2%
fluid loss, 0.2% retardant (897 cu.ft.). Displace w/179 bbl wtr.
PT csg to 3800 psi/15 min, OK. WOC. ND BOP. NU WH. RD. Rig released.

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

Signed _____
no

Title Regulatory Supervisor

Date 4/17/00

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

Date

CONDITION OF APPROVAL, if any: