

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
BLM

Sundry Notices and Reports 97 JAN 29 PM 1:37

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

1787'FNL, 920'FWL, Sec.18, T-29-N, R-8-W, NMPM

070 FARMINGTON, NM

5. Lease Number
SF-078414A

6. If Indian, All. or
Tribe Name

Unit Agreement Name

8. Well Name & Number
Day #5

9. API Well No.
30-045-20492

10. Field and Pool
Blanco Pictured Cliffs

11. County and State
San Juan 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

12-4-96 MIRU. SDON.

12-5-96 ND WH. NU BOP. TIH. Plug #1: pump 14 sx Class "B" neat cmt @ 2555-3055'.
TOOH to 2559'. Plug #2: pump 14 sx Class "B" neat cmt inside csg @
2055-2555'. TOOH to 1439'. WOC. TIH, tag TOC @ 2020'. PT csg to 500 psi,
OK. Plug #3: pump 14 sx Class "B" neat cmt inside csg @ 1520-2020'. TOOH
to 1520'. Plug #4: pump 14 sx Class "B" neat cmt inside csg @ 1520-1020'.
TOOH. TIH, perf 2 sqz holes @ 751'. Attempt to establish circ. Plug #5:
pump 34 sx Class "B" neat cmt outside csg @ 651-751'. Pump 6 sx Class "B"
neat cmt inside csg to 551'. WOC. SDON.

12-6-96 TIH, tag cmt @ 578'. TOOH. TIH, perf 2 sqz holes @ 176'. Establish circ w/17
bbl wtr. Plug #6: pump 74 sx Class "B" neat cmt down csg & out bradenhead.
Circ 1 bbl cmt to surface. WOC. ND BOP. Cut off WH. Fill csg w/15 sx Class
"B" neat cmt. Install dry hole marker w/10 sx Class "B" neat cmt. RD. Rig
released. Well plugged and abandoned 12-6-96. (J. Ruybalid, BLM was on
location during plugging).

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

Signed [Signature] Title Regulatory Administrator Date 1/7/97

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

APPROVED

DISTRICT MANAGER

/S/ Duane W. Spencer

NMOC