

submitted in lieu of Form 3160-5

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

950' FSL, 1485' FEL, Sec. 18, T-29-N, R-7-W, NMPM

5. Lease Number

SF-079514

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 #81A

9. API Well No.

30-039-25642

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 - Mesaverde pay add

13. Describe Proposed or Completed Operations

8-29-00 MIRU. ND WH. NU BOP. SDON.

8-30-00 TOOH w/255 jts 2 3/8" tbg. TIH w/4 1/2" CIBP, set @ 5100'. Load csg w/166 bbl 2% KCl wtr. SDON.

8-31-00 PT csg to 3000 psi/15 min, OK. Pump 15 bbl 10% acetic acid @ 4366-5100'. TOOH. TIH, perf Lewis w/1 SPF @ 3366-3376', 4409-4419', 4460-4470', 4572-4582', 4634-4644', 4688-4698', 4756-4766', 4790-4800', 4862-4872', 4918-4928'. SDON.

9-1-00 TIH, perf rest of Lewis w/1 SPF @ 4964-4974', 5016-5026' for a total of 120 holes Break down w/25 bbl 10% acetic acid. Frac lower Lewis w/799 bbl 20# linear gel, 1,096,200 SCF N2, 160,000# 20/40 Brady sd. CO after frac.

9-2/4-00 Blow well & CO. RD.

9-15-00 MIRU. SD for weekend.

9-17-00 Blow well & CO.

9-18-00 Blow well & CO. ND WH. NU BOP. TIH w/mill to 4870'. Blow well & CO to 5100'.

9-19-00 Establish circ. Mill out CIBP @ 5100'. TIH, circ hole clean.

9-20-00 TOOH w/mill. TIH w/260 jts 2 3/8" 4.7# J-55 EUE tbg, landed @ 8048'. ND BOP. NU WH. RD. Rig released.

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

Signed Nancy Altman -for Title Regulatory Supervisor Date 10/2/00
no

ACCEPTED FOR RECORD

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

MOOD

OCT 11 2000