

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

790' FNL, 850' FEL, Sec. 14, T-30-N, R-6-W, NMPM

5. Lease Number
SF-080713B

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
San Juan 30-6 U #442

9. API Well No.
30-039-24460

10. Field and Pool
Basin Fruitland Coal

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

<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 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 - Recavitate	

13. Describe Proposed or Completed Operations

It is intended to recavitate the subject well in the following manner:

Pull the production tubing. Pull the 5 1/2" liner. Cavitare the Fruitland Coal formation utilizing natural and air assisted surges until the well stabilizes. Clean the well to total depth and run a 5 1/2" 15.5# K-55 casing liner. The liner will be pre-perforated with 4 shots per foot across the coal intervals. Rerun the production tubing. The well will then be returned to production.

RECEIVED
FEB - 9 1998
OIL CON. DIV.
DIST. 3

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

Signed Nancy Altman (DWSFTC) Title for Regulatory Administrator Date 1/30/98

(This space for Federal or State Office use)

APPROVED BY /s/ Duane W. Spencer Title _____ Date FEB - 6 1998

CONDITION OF APPROVAL, if any:

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