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**
1465'FNL, 940'FWL, Sec. 18, T-30-N, R-6-W, NMPM

5. **Lease Number**
NM-03385

6. **If Indian, All. or Tribe Name**

7. **Unit Agreement Name**
San Juan 30-6 Unit

8. **Well Name & Number**
San Juan 30-6 U #17A

9. **API Well No.**
30-039-25670

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	___ Recompletion	___ Plugging Back
_X_ Subsequent Report	___ Casing Repair	___ Altering Casing	_X_ Other -
___ Final Abandonment	___ Change of Plans	___ New Construction	___ Non-Routine Fracturing
	___ Water Shut off	___ Conversion to Injection	

13. Describe Proposed or Completed Operations

9-28-97 Drill to intermediate TD @ 3595'. Circ hole clean. TOOH.

9-29-97 TIH w/86 jts 7" 20# J-55 ST&C csg, set @ 3588'. Cmtd w/207 sx Class "B" 50/50 poz w/2% gel, 10 pps Gilsonite, 0.5 pps Flocele, 1% calcium chloride (261 cu.ft.). Circ 10 bbl cmt to surface. Stage tool set @ 2793'. Cmtd second stage w/293 sx Class "B" 65/35 poz w/6% gel, 5 pps Gilsonite, 0.25 pps Flocele, 2% calcium chloride (574 cu.ft.). Tailed w/100 sx Class "B" neat cmt w/5 pps Gilsonite, 0.25 pps Flocele, 2% calcium chloride (120 cu.ft.). Circ 28 bbl cmt to surface. WOC. PT BOP & csg to 1500 psi/30 min, OK. Drilling ahead.

10-3-97 Drill to TD @ 7886'. Circ hole clean. TOOH. TIH, ran logs.

10-4-97 Ran logs. Blow well & CO. TOOH. TIH w/21 jts 5 1/2" 17# J-55 csg, 160 jts 5 1/2" 15.5# J-55 csg, set @ 7886'. Cmtd w/150 sx Class "G" 65/35 poz w/6% gel, 3 pps Gilsonite, 0.25 pps Flocele (290 cu.ft.). Tailed w/145 sx Class "G" 50/50 poz w/2% gel, 3 pps Gilsonite, 0.25 pps Flocele, 0.4% fluid loss (193 cu.ft.). WOC. PT csg to 3000 psi/15 min, OK. ND BOP. NU WH. RD. Rig released.

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

Signed Peggy Bradfield Title Regulatory Administrator Date 10/13/97

(This space for Federal or State Office use)
APPROVED BY _____ Title _____ Date _____
CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD
OCT 16 1997
FARMINGTON DISTRICT OFFICE

NMOCD