UNITED STATES

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

Sundry Not	ices and Reports on Wells	
		Lease Number
		NM-4453 If Indian, All. or
Type of Well		Tribe Name
GAS		
	7.	Unit Agreement Nam
Name of Operator		
BURLINGTQN		
	& GAS COMPANY	
		Well Name & Number
Address & Phone No. of Oper	TOT /	Carson SRC #102 API Well No.
PO Box 4289, Farmington, N	1 8/499 (505), 326-9/00	30-039-26385
Location of Well, Footage,	Sec., T, R, M 10.	Field and Pool
2435'FSL, 2075'FWL, Sec.2,	r-30-N. R-5-W, NMPM	Basin Fruitland Co
	11.	County and State Rio Arriba Co, NM
		ATO ATTIDA CO, INT
CHECK APPROPRIATE BOX TO I	NDICATE NATURE OF NOTICE, REPORT, OTHER	DATA
Type of Submission	Type of Action	
Notice of Intent	Abandonment Change of Pla Recompletion New Construct	
auk-rement Bonort	Recompletion New Construct Plugging Back Non-Routine F	
X Subsequent Report	Casing Repair Water Shut of	f
	The Cooling Conversion to	Injection
Final Abandonment	Altering Casing Conversion to	-
3. Describe Proposed or Com	X Other - Install pump	. PT tbg & pump
3. Describe Proposed or Com	X Other - Install pump pleted Operations H w/127 %" rods & pump. Load hole w/wtr.	. PT tbg & pump
3. Describe Proposed or Con 10-4-00 MIRU. ND WH. To to 500 psi, Con Signed MAN Certify that to	Title Regulatory Supervisor Da	PT tbg & pump ased.
10-4-00 MIRU. ND WH. To 500 psi, Control of the signed of the space for Federal or St	Title Regulatory Supervisor Da	PT tbg & pump ased.
3. Describe Proposed or Con 10-4-00 MIRU. ND WH. To to 500 psi, Con Signed MAN Certify that to	Title Regulatory Supervisor Date	PT tbg & pump ased.