

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

<p>1. Type of Well GAS</p> <hr/> <p>2. Name of Operator <b>BURLINGTON RESOURCES</b> OIL &amp; GAS COMPANY</p> <hr/> <p>3. Address &amp; Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec., T, R, M 1550' FSL, 790' FWL, Sec. 13, T-29-N, R-10-W, NMPM L</p>	<p>5. Lease Number SF-080655</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name</p>  <p>8. Well Name &amp; Number Neudecker #7</p> <p>9. API Well No. 30-045-08255</p> <p>10. Field and Pool Basin Dakota</p> <p>11. County and State San Juan Co, NM</p>
--	--

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

Type of Submission

Type of Action

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" 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 -	

13. Describe Proposed or Completed Operations

4-3-97 MIFU. ND WH. NU BOP. TIH, tag fill @ 6760'. TOO H w/211 jts 2 3/8" tbg. TIH. SDON.

4-4-97 Circ hole clean to PBTD @ 6842'. Blow well & CO. SD for weekend.

4-7-97 Blow well & CO. TOO H. TIH w/216 jts 2 3/8" 4.7# J-55 EUE tbg, landed @ 6773'. ND BOP. NU WH. Blow well & CO. RD. Rig released.

RECEIVED  
JUN 18 1997

OIL CON. DIV.  
DIST. 3

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

Signed *Peggy Stransted* Title Regulatory Administrator Date 6/10/97

(This space for Federal or State Office use)

APPROVED BY \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

JUN 16 1997

NMOCD

FARMINGTON DISTRICT OFFICE  
*MT*