

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
BLM

Sundry Notices and Reports on Wells

99 APR -9 PM 12:27

070 FARMINGTON, NM

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

1750' FNL, 1820' FEL, Sec. 8, T-29-N, R-10-W, NMPM

Lease Number
SF-078197

6. If Indian, All. or
Tribe Name

Unit Agreement Name

8. Well Name & Number

Nye #4

9. API Well No.

30-045-20675

10. Field and Pool

Aztec Pict'd Cliffs

11. County and State

San Juan Co, NM

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 - Restimulate	

13. Describe Proposed or Completed Operations

3-31-99 MIRU. ND WH. NU BOP. TIH w/RBP, set @ 2096'. PT to 500 psi, leaked off. Rls RBP & reset @ 2064'. PT, leaked off. TOOH. ND BOP. NU test valve. PT csg to 3500 psi, leaked off. ND test valve. NU BOP. TIH w/2 7/8" pkr, set @ 2032'. PT RBP to 1500 psi; PT csg to 3500 psi, OK. Rls pkr. SDON.

4-1-99 TOOH w/pkr. TIH, rls RBP. TOOH w/RBP. TIH, tag up @ 2210'. CO to PBTD @ 2253'. Circ hole clean. TOOH. ND BOP. NU frac valve. RD. Rig rlstd.

4-1-99 RU. Pt lines to 4500 psi. Frac PC w/416 bbl 30# linear gel, 175,000# 20/40 AZ snd, 476,900 SCF N2. RD. Flow back well.

4-2&3-99 Flow back well.

4-4-99 Flow back well. Shut-in well. Waiting to CO.

4-5-99 RU. CO @ 2174-2253'. TOOH.

4-6-99 Flow well. Well turned over to production.

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

Signed [Signature] Title Regulatory Administrator Date 4/8/99
vkh

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

Date APR 8 1999

CONDITION OF APPROVAL, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

NMOCD

FARMINGTON FIELD OFFICE
BY [Signature]