## UNITED STATES

## DEPARTMENT OF THE INTERIOR

Tribe Name  2. Name of Operator  **RESCURSES***  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 1450' FSL, 1190' FEL, Sec. 1, T-29-N, R-12-W, NMPM  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA  Type of Submission Type of Action Notice of Intent Abandonment Recompletion Non-Routine Fracturing Casing Repair Plugging Back Casing Repair Altering Casing Tother Submission Tother Tubing Installation  13. Describe Proposed or Completed Operations  4-15-99 MIRU. ND WH. NU BOP. TIH, tag up @ 2135'. Circ hole clean to PBTD		LAND MANAGEMI			. 00			
SP-065557A  If Indian, All. or Tribe Name  2. Name of Operator  **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  14. Location of Well. Footage, Sec., T, R, M  150' FSL, 1190' FEL, Sec. 1, T-29-N, R-12-W, NMPM  161. County and State  Type of Notice of Intent  **Abandonment Abandonment Altering Casing Repair Water Shut off  **Final Abandonment Altering Casing Repair Conversion to Injection  **A other - Tubing Installation  17. Describe Proposed or Completed Operations  4-15-99 MIRU. ND WH. NU BOP. TIH, tag up @ 2135'. Circ hole clean to PBTD  **© 2163'. Land thg w/62 jts 1 %" 2.9\$ J-55 thg, set @ 2025'. ND BOP.  NU WH. RD. Rig released.  (This space for Federal or State Office use)  **APPROVED BY Title Date  **Title Date  **Well Name & Number Correct.**  Well Name & Number Correct.**  Well Name & Number Correct.**  **Well Name &	Sundry Notice:	s and Reports	s on Well	's	· • • • • • • • • • • • • • • • • • • •			
### 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 1450' FSL, 1190' FEL, Sec. 1, T-29-N, R-12-W, NMPM  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission Type of Submission Recompletion Notice of Intent Recompletion Recompletion Recompletion Recompletion Altering Gasing Conversion to Injection Type of Submission Recompleted Operations Type of Action Recompletion Recompletion Non-Routine Practuring Recompletion Recompletion Non-Routine Practuring Recompletion Recompletion Recompletion Non-Routine Practuring Recompletion Recompletio	1. Type of Well GAS		on i	REIVE		SF-065557A If Indian, All. or Tribe Name		
3. Address & Phone No. of Operator FO Box 4289, Farmington, NM 87499 (505) 326-9700  4. Location of Well, Footage, Sec., T, R, M 10. Field and Pool 1450' FSL, 1190' FEL, Sec. 1, T-29-N, R-12-W, NMPM  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission Type of Submission Recompletion Notice of Intent Recompletion X Subsequent Report Final Abandonment Altering Casing Final Abandon Non-Routine Fracturing Water Shut off Final Abandonment Altering Casing Final Abandonment Al	2. Name of Operator		14/13		。 四	ona o nga oomono namo		
4. Location of Well, Footage, Sec., T, R, M  10. Field and Pool Fulcher Kutz PC  11. County and State San Juan Co., NM  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission  Notice of Intent Abandonment Recompletion Plugging Back Non-Routine Fracturing Casing Repair Subsequent Report Plugging Back Non-Routine Fracturing Casing Repair Conversion to Injection  Altering Casing Conversion to Injection  Tother Tubing Installation  13. Describe Proposed or Completed Operations  4-15-99 MIRU. ND WH. NU BOP. TIH, tag up © 2135'. Circ hole clean to PBTD  © 2163'. Land tbg w/62 jts 1 %" 2.9# J-55 tbg, set © 2025'. ND BOP.  NU WH. RD. Rig released.	BURLINGTON RESOURCES OIL & G					Well Name & Number		
4. Location of Well, Footage, Sec., T, R, M  10. Field and Pool Fulcher Kutz PC  11. County and State San Juan Co., NM  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission  Notice of Intent Abandonment Recompletion Plugging Back Non-Routine Fracturing Casing Repair Subsequent Report Plugging Back Non-Routine Fracturing Casing Repair Conversion to Injection  Altering Casing Conversion to Injection  Tother Tubing Installation  13. Describe Proposed or Completed Operations  4-15-99 MIRU. ND WH. NU BOP. TIH, tag up © 2135'. Circ hole clean to PBTD  © 2163'. Land tbg w/62 jts 1 %" 2.9# J-55 tbg, set © 2025'. ND BOP.  NU WH. RD. Rig released.	3. Address & Phone No. of Operator	7400 (505) 3:	0700	DIAIP A	0	Cornell #3R		
12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA  Type of Submission Type of Action  Notice of Intent Abandonment Change of Plans Recompletion New Construction Plugging Back Non-Routine Fracturing Casing Repair Water Shut off Final Abandonment Altering Casing Conversion to Injection X Other - Tubing Installation  13. Describe Proposed or Completed Operations 4-15-99 MIRU. ND WH. NU BOP. TIH, tag up © 2135'. Circ hole clean to PBTD © 2163'. Land tbg w/62 jts 1 ½" 2.9# J-55 tbg, set © 2025'. ND BOP. NU WH. RD. Rig released.	4. Location of Well, Footage, Sec.	, T, R, M				30-045-29539 Field and Pool		
Type of Submission  Notice of Intent Abandonment Recompletion New Construction Non-Routine Fracturing Casing Repair Altering Casing Repair Final Abandonment Altering Casing Conversion to Injection X Other - Tubing Installation  13. Describe Proposed or Completed Operations  4-15-99 MIRU. ND WH. NU BOP. TIH, tag up @ 2135'. Circ hole clean to PBTD @ 2163'. Land tbg w/62 jts 1 ½" 2.9# J-55 tbg, set @ 2025'. ND BOP. NU WH. RD. Rig released.	1430 181, 1190 121, 200. 1,		5		11.			
4-15-99 MIRU. ND WH. NU BOP. TIH, tag up @ 2135'. Circ hole clean to PBTD  @ 2163'. Land thg w/62 jts 1 %" 2.9# J-55 thg, set @ 2025'. ND BOP.  NU WH. RD. Rig released.  14. I hereby certify that the foregoing is true and correct.  Signed Title Regulatory Administrator Date 5/4/99 vkh  (This space for Federal or State Office use)  APPROVED BY Title Date	Notice of IntentX_ Subsequent ReportFinal Abandonment	Abandonme: Recomplet Plugging Casing Re Altering	nt ion Back pair Casing	Change of New Consum Non-Route Water Sl	struct tine I hut of	tion Fracturing Ef		
Signed Makhuld Title Regulatory Administrator Date 5/4/99 vkh  (This space for Federal or State Office use)  APPROVED BY Title Date	4-15-99 MIRU. ND WH. NU E @ 2163'. Land t	BOP. TIH, ta	ıg up @ 2:					
	(This space for Federal or State O	Title <u>Re</u>		Administr				
CONTRACTOR OF SAME SAME CANADAM CANADA	CONDITION OF APPROVAL, if any:			Da	- F	Tana a facility de de la		