

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

2001 MAR -5 PM 1:38

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) 325-9700

4. Location of Well, Footage, Sec., T, R, M

1560' FNL, 1105' FEL, Sec. 7, T-30-N, R-8-W, NMPM

5. Lease Number
SF-078580

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
Howell C #3B

9. API Well No.
30-045-30325

10. Field and Pool
Blanco PC/Blanco MV

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

☒ Notice of Intent

☐ Abandonment

☒ Change of Plans

☐ Subsequent Report

☐ Recompletion

☐ New Construction

☐ Final Abandonment

☐ Plugging Back

☐ Non-Routine Fracturing

☐ Casing Repair

☐ Water Shut off

☐ Altering Casing

☐ Conversion to Injection

☒ Other -

13. Describe Proposed or Completed Operations

It is intended to alter the approved casing depths and cement of the subject well.

Revisions:

Mud Program:

Interval	Type	Weight	Vis	Fluid Loss
0-200'	Spud	8.4-9.0	40-50	No control
200-3424'	LSND	8.4-9.0	30-60	No control
3424-5677'	Air/Mist	n/a	n/a	n/a

Casing Program:

Hole Size	Depth Interval	Casing Size	Weight	Grade
12 1/4"	0-200'	9 5/8"	32.3#	H-40
8 3/4"	0-3424'	7"	20.0#	J-55
6 1/4"	3324-5677'	4 1/2"	10.5#	J-55

Cementing Program:

9 5/8" surface casing - 159 sx Class "H" cement with 0.25 pps Flocele and 3% calcium chloride (188 cu.ft. of slurry, 200% excess to circulate to surface).
7" intermediate casing - lead w/374 sx 50/50 Class G/TXI cement with 2.5% sodium metasilicate, 10 pps Gilsonite, 0.5 pps Flocele, 2% calcium chloride. Tail with 90 sx Class "G" 50/50 poz w/2% gel, 2% calcium chloride, 5 pps Gilsonite, 0.25 pps Flocele, 0.1% defoamer (1081 cu.ft. of slurry, 110% excess to circulate to surface).
4 1/2" production liner - cement with 236 sx Class "G" 50/50 poz w/4.5% gel, 0.25 pps Flocele, 5 pps Gilsonite, 0.25% fluid loss, 0.35% dispersant, 0.1% antifoam (338 cu.ft., 50% excess to circulate liner).

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

Signed Jim Lovato Title Regulatory Supervisor Date 3/1/01
TLW

(This space for Federal or State Office use)

APPROVED BY Jim Lovato Title _____ Date _____

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.

NMCCD