

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

Sundry Notices and Reports on Wells

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) 326-9500

4. Location of Well, Footage, Sec., T, R, M
1640' FNL, 1030' FEL, Sec. 12, T-29-N, R-12-W, NMPM

5. Lease Number
SF-065557-A

6. If Indian, All. or
Tribe Name

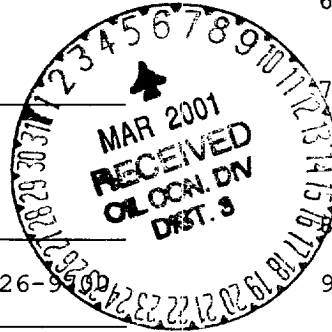
7. Unit Agreement Name

8. Well Name & Number
Cornell #1R

9. API Well No.
30-045-30447

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

Type of Action

<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input checked="" type="checkbox"/> Change of Plans
<input 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 checked="" type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other -	

13. Describe Proposed or Completed Operations

It is intended to alter the approved casing & cement program of the subject well.

Revisions:

Mud Program:

Interval	Type	Weight	Vis.	Fluid Loss
0-40'	Spud	8.4-9.0	40-50	No control
40-2086'	FW	8.4-9.0	32-45	No control

Casing Program:

Hole Size	Depth Interval	Casing Size	Weight	Grade
12 1/4"	0-40'	9 5/8"	32.3#	H-40
6 1/4"	0-2086'	2 7/8"	6.5#	J-55

Cementing Program:

9 5/8" surface casing - 32 sx API Class A & B cement (38 cu.ft. of slurry, 200% excess to bring cmt to surface).

2 7/8" production liner - lead w/252 sacks Premium Lite cmt with 2% calcium chloride, 0.25 pps floccelle, 5 pps LCM-1, 8% gel. Tail with 90 sacks Type III cmt with 1% calcium chloride, 1/4#/sack floccelle (701 cu.ft., 100% excess to circulate to surface).

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

Signed [Signature] Title Regulatory Supervisor Date 2/28/01
TLW

(This space for Federal or State Office use)

APPROVED BY [Signature] Title P.L. B. Date 3-1-01

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.

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