## UNITED STATES DEPARTMENT OF THE INTERMOR BUREAU OF LAND MANAGEMENT

Tribe Name  7. Unit Agreement Na  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 1200-455-30778  4. Location of Well, Footage, Sec., T, R, M 1200-455-30778  4. Location of Well, Footage, Sec., T, R, M 1200-455-30778  4. Location of Well, Footage, Sec., T, R, M 1200-455-30778  4. Location of Well, Footage, Sec., T, R, M 1200-455-30778  4. Location of Well, Footage, Sec., T, R, M 1200-455-30778  4. Location of Well, Footage, Sec., T, R, M 1200-455-30778  4. Location of Well, Footage, Sec., T, R, M 1200-455-30778  4. Location of Well, Footage, Sec., T, R, M 1200-455-30778  4. Location of Well, Footage, Sec., T, R, M 1200-455-30778  4. Location of Well, Footage, Sec., T, R, M 1200-455-30778  4. Location of Well, Footage, Sec., T, R, M 1200-455-30778  4. Location of Well, Footage, Sec., T, R, M 1200-455-30778  4. Location of Well, Footage, Sec., T, R, M 1200-455-30778  5. Location of Well, Footage, Sec., T, R, M 1200-455-30778  6. Well Name & Number Shutter & San Juan Co. NM  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Action New Construction N	Sundry Notices and Reports on Wells		
1. Type of Well  GAS  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 1200'**Str. 1900'**Sw., Sec.1, T-29-N, R-11-N, NMPM  12: CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission Notice of Intent Abandonment Recompletion New Construction Plugging Back Non-Routine Fracturing Casing Repair Water Shut off Altering Casing Conversion to Injection  13. Describe Proposed or Completed Operations  2/26/02 MIRU. ND WH. NU BOP. TOOH w/2-3/8" tbg. SDON. 2/27/02 TIH w/bit. Drill out cent to 4503'. Circ hole clean. SDON. 2/27/02 TIH w/bit. Drill out cent to 4503'. Circ hole clean. SDON. 2/27/02 TIH w/bit. Drill out cent to 4503'. Circ hole clean. SDON. 2/27/02 TIH w/bit. Drill out cent to 4503'. Circ hole clean. SDON. 2/27/02 TIH w/bit. Drill out cent to 4503'. Circ hole clean. SDON. 2/28/02 TOOH w/bit. TIH & ran GR/CBL/CCL & 6544-2700' & GR/CcL to surface. Found TOC & 4786', no can & 4786-4504' DV tool. ND BOP. NU frac valve. FT cag to 4100 psi, 0K.  Title Eggulatory Supervisor Date 4/23/02 TIM  Title Eggulatory Supervisor Date 4/23/02 TIM  Title Eggulatory Supervisor Date 4/23/02 THW  This space for Federal or State Office use)		5.	
2. Name of Operator  RESIDERCES  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 10. Field and Pool Otero Chacra/ Blanco MV/Basin I 11. County and State 12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission Notice of Intent Recompletion Notice of Intent Recompletion Pinal Abandonment Abandonment Casing Repair Pinal Abandonment Altering Casing Casing Repair Altering Casing Casing Repair Altering Casing Water Shut off Conversion to Injection Conversion to Injectio	**	6.	If Indian, All. or
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700  4. Location of Well, Footage, Sec., T, R, M 10-200-FSh, 1-800-FWM, Sec.1, T-29-N, R-11-W, NMPM 12-CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission Notice of Intent Abandonment Casing Repair Pfinal Abandonment Altering Casing Repair Attering Casing Repair Pfinal Abandonment Altering Casing Conversion to Injection Altering Casing Conversion to Injection 2/26/02 MIRU. ND WH. NU BOP. TOOH w/2-3/8" tbg. SDON. 2/27/02 TIH w/bit. Drill out cmt to 4503'. Circ hole clean. SDON. 2/28/02 TOOH w/bit. TH & ran GR/CBL/CtL @ 6944-2700' & GR/CCt to surface. Found TOC @ 4796', no cmt @ 4796-4504' DV tool. ND BOP. NU frac Valve. PT csg to 4100 psi, OK.  Title Regulatory Supervisor Date 4/23/02 TIM This space for Federal or State Office use)		7.	Unit Agreement Name
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700  4. Location of Well, Footage, Sec., T, R, M 10. Field and Pool 1200'FSir, 1000'FWi, Sec.1, T-29-N, R-11-W, NMPM 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 Recompletion No.			
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700  4. Location of Well, Footage, Sec., T, R, M 10. Field and Pool 1200'F3h, -1000'FWL, Sec.1, T-29-N, R-11-W, NMFM 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 Recompletion Notice of Intent Recompletion Non-Routine Fracturing Recompletion Plugging Back Casing Repair Altering Casing Conversion to Injection  13. Describe Proposed or Completed Operations 2/26/02 MIRU. ND WH. NU BOP. TOOH w/2-3/8" tbg. SDON. 2/27/02 TIH w/bit. Drill out cmt to 4503'. Circ hole clean. SDON. 2/28/02 TOOH w/bit. TIH & ran GR/CBL/CCL © 6944-2700' & GR/CCL to surface. Found TOC @ 4796', no cmt @ 4796-4504' DV tool. ND BOP. NU frac valve. PT csg to 4100 psi, OK.  Title Regulatory Supervisor Date 4/23/02 TUN  TIM  Title Regulatory Supervisor Date 4/23/02 TUN  Title Regulatory Supervisor Date 4/23/02 TUN  TIM  The space for Federal or State Office use)	BURLINGTON RESOURCES		
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700  4. Location of Well, Footage, Sec., T, R, M 10. Field and Pool 1200-FSL, 1000-FWL, Sec.l, T-29-N, R-11-W, NMPM 11. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA 11. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA 12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA 13. Subsequent Report 14. Subsequent Report 15. Describe Proposed or Completed Operations 16. Describe Proposed or Completed Operations 17. Cher 18. Describe Proposed or Completed Operations 18. Describe Proposed or Completed Operations 19. Desc	OIL & GAS COMPANY	8.	Well Name & Number
9. APT Well No. 30-045-30778 4. Location of Well, Footage, Sec., T, R, M 10. Field and Pool 12001FSID, 100001FMS, Sec.1, T-29-N, R-11-W, NMPM 11. Country 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 New Construction Plugging Back Recompletion Final Abandonment Recompletion Final Abandonment Altering Casing Repair Altering Casing Conversion to Injection  13. Describe Proposed or Completed Operations 2/26/02 MIRU. ND WH. NU BOP. TOOH w/2-3/8" tbg. SDON. 2/27/02 TIH w/bit. Drill out cmt to 4503'. Circ hole clean. SDON. 2/28/02 TOOH w/bit. TIH & ran GR/CBL/CCL & 6944-2700' & GR/CCL to surface. Found TOC & 4796', no cmt & 4796-4504' DV tool. ND BOP. NU frac valve. PT csg to 4100 psi, OK.  14. I Kereby certify that the foregoing is true and correct.  Signed  Title Regulatory Supervisor Date 4/23/02 TIM TIM TTM TIM TTM TIM TTM TIM TTM TIM TTM TIM TTM TIM TI	3. Address & Phone No. of Operator	0.	Shults Federal #1E
4. Location of Well, Footage, Sec., T, R, M  120 Field and Fool  1200 FSt, 1000 FWs, Sec.1, T-29-N, R-11-W, NMPM  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  New Construction  New Co		9.	
Blanco MV/Basin I  11. County and State San Juan Co, NM  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission  Motice of Intent Abandonment Recompletion New Construction New Construction New Construction New Construction New Construction Now Construction New Construction	4. Location of Well, Footage, Sec., T, R, M  1200'FSL, 1000'FWL, Sec.1, T-29-N, R-11-W, NMPM	10.	Field and Pool Otero Chacra/
12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA  Type of Submission  Notice of Intent  Recompletion  Recompletion  Non-Routine Fracturing  Casing Repair  Altering Casing Conversion to Injection  X Other  13. Describe Proposed or Completed Operations  2/26/02 MIRU. ND WH. NU BOP. TOOH w/2-3/8" tbg. SDON. 2/27/02 TIH w/bit. Drill out cmt to 4503'. Circ hole clean. SDON. 2/28/02 TOOH w/bit. TIH & ran GR/CBL/CCL @ 6944-2700' & GR/CCL to surface.  Found TOC @ 4796', no cmt @ 4796-4504' DV tool. ND BOP. NU frac valve. PT csg to 4100 psi, OK.  14. I hereby certify that the foregoing is true and correct.  Signed  Title Regulatory Supervisor Date 4/23/02  TLW  TIM  Title Regulatory Supervisor Date 4/23/02  TLW  TIM  Title Regulatory Supervisor Date 4/23/02  TLW  TIM  TIM  TIM  TIM  TIM  TOTAL  TOTAL	·	11.	_
14. I hereby certify that the foregoing is true and correct.  Signed Title Regulatory Supervisor Date 4/23/02 TLW  (This space for Federal or State Office use)	X_ Subsequent Report Plugging Back Casing Repair Altering Casing X_ Other -  13. Describe Proposed or Completed Operations  2/26/02 MIRU. ND WH. NU BOP. TOOH w/2-3/8" tbg. S 2/27/02 TIH w/bit. Drill out cmt to 4503'. Circ h 2/28/02 TOOH w/bit. TIH & ran GR/CBL/CCL @ 6944-2 Found TOC @ 4796', no cmt @ 4796-4504'	Non-Routine I Water Shut of Conversion to	Fracturing  If  Injection  ON.  to surface.
(This space for Federal or State Office use)	14. I hereby certify that the foregoing is true and co	orrect.	
(This space for Federal or State Office use)	The state of the s		te 4/23/02
	Janua Janua Lana		
TIFLE USE OF THE PARTY OF THE P	(This space for Federal or State Office use) APPROVED BY Title	Date	~ 2 ∌ √an <b>2</b>