

submitted in lieu of Form 3160-5

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) 326-9900

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

830' FNL, 1758' FWL, Sec. 34, T-31-N, R-13-W, NMPM

5. Lease Number  
SF-078463-A

6. If Indian, All. or  
Tribe Name

7. Unit Agreement Name

8. Well Name & Number  
Lea Federal #1E

9. API Well No.  
30-045-25980

10. Field and Pool  
Basin Dakota

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 - Tubing repair	

13. Describe Proposed or Completed Operations

9-26-00 MIRU. ND WH. NU BOP. TIH, tag up @ 6453'. TOOH w/2 3/8" tbg. TIH w/bit. SDON.  
9-27-00 Circ & CO to PBTD @ 6498'. Flow well. SDON.  
9-28-00 Spot acid. TOOH w/bit. TIH w/209 jts 2 3/8" 4.7# J-55 tbg, set @ 6460'. ND BOP. NU WH. SDON.  
9-29-00 RD. Rig released.

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

Signed Tammy Wimsatt Title Regulatory Supervisor Date 10/2/00  
TLW

(This space for Federal or State Office use)

APPROVED BY \_\_\_\_\_ 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

ACCEPTED FOR RECORD

OCT 06 2000  
OFFICE