

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division

Sundry Notices and Reports on Wells

<p>1. Type of Well GAS</p> <hr/> <p>2. Name of Operator BURLINGTON RESOURCES OIL & GAS COMPANY</p> <hr/> <p>3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec., T, R, M <input checked="" type="checkbox"/> 920' FNL, 1020' FEL, Sec. 32, T-32-N, R-11-W, NMPM, San Juan County, NM</p>	<p>API # (assigned by OCD) 30-045-22325</p> <p>5. Lease Number</p> <p>6. State Oil&Gas Lease # B-11505-60</p> <p>7. Lease Name/Unit Name</p> <p>Day State</p> <p>8. Well No. #1A</p> <p>9. Pool Name or Wildcat Blanco MV/Blanco PC</p> <p>10. Elevation:</p>
---	---

Type of Submission	Type of Action	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input 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 type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other - Commingle	

13. Describe Proposed or Completed Operations

It is intended to commingle the subject well according to the attached procedure.

RECEIVED
DEC 20 1999
OIL CON. DIV.
DIST. 3

SIGNATURE *Deanna Cale* Regulatory Administrator December 16, 1999

trc

(This space for State Use)

Approved by *SSJ* Title _____ Date DEC 20 1999

SUPERVISOR DISTRICT # 3