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	**5. Lease Number** NM-23247
	6. If Indian, All. or Tribe Name
2. Name of Operator *BURLINGTON RESOURCES* OIL & GAS COMPANY	**7. Unit Agreement Name**
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-	**8. Well Name & Number** State Line #2
	9. API Well No. 30-045-24150
4. Location of Well, Footage, Sec., T, R, M 1560'FNL, 1680'FEL, Sec.14, T-32-N, R-13-W, NMPM	**10. Field and Pool** Basin Dakota
	11. County and State San Juan Co, NM

AUG 2000 RECEIVED OIL CON. DIV DIST. 3

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

Type of Submission

___ Notice of Intent

___ Subsequent Report

_X_ Final Abandonment

Type of Action

_X_ Abandonment
___ Recompletion
___ Plugging Back
___ Casing Repair
___ Altering Casing
___ Other -

___ Change of Plans
___ New Construction
___ Non-Routine Fracturing
___ Water Shut off
___ Conversion to Injection

13. Describe Proposed or Completed Operations

7-17-00 MIRU. ND WH. NU BOP. TOOH w/2 3/8" tbg. TIH w/gauge ring to 4630'. Set
4 ½" cmt ret @ 4612'. PT csg to 500 psi/5 min, OK. SDON. 4459

7-18-00 Plug #1: pump 12 sx Class "B" neat cmt inside csg @ 4612-3658'. Plug #2:
pump 12 sx Class "B" neat cmt inside csg @ 3816-3658'. Plug #3: pump
34 sx Class "B" neat cmt inside csg @ 2951-2659'. Perf sqz holes @
1620'. Attempt to est rate into perfs, couldn't pump thru perfs.
(Approval from Marco Kecman, BLM, to spot inside plug over MV formation).
Plug #4: pump 42 sx Class "B" neat cmt inside csg @ 1691-1467'. Perf
3 holes @ 373'. Plug #5: pump 136 sx Class "B" neat cmt down 7" csg
@ 373'-surface. Circ 1 bbl cmt to surface. ND BOP. Dig out & cut off
WH. Install dry hole marker w/10 sx Class "B" cmt. RD. Rig released.
(Marco Kecman, BLM, was on location.) Well plugged and abondoned on
7-18-00.

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

Signed _____ Title _Regulatory Supervisor_ Date 8/1/00____

_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.

NMOCD