

DATE IN 8/20/03	SUSPENSE 9/20/03	ENGINEER MS	LOGGED IN LR	TYPE NSL	APP NO. PLR0323950909
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ABOVE THIS LINE FOR DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION  
- Engineering Bureau -  
1220 South St. Francis Drive, Santa Fe, NM 87505



**ADMINISTRATIVE APPLICATION CHECKLIST**

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

**Application Acronyms:**

- [NSL-Non-Standard Location] [NSP-Non-Standard Proration Unit] [SD-Simultaneous Dedication]
- [DHC-Downhole Commingling] [CTB-Lease Commingling] [PLC-Pool/Lease Commingling]
- [PC-Pool Commingling] [OLS - Off-Lease Storage] [OLM-Off-Lease Measurement]
- [WFX-Waterflood Expansion] [PMX-Pressure Maintenance Expansion]
- [SWD-Salt Water Disposal] [IPI-Injection Pressure Increase]
- [EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]

- [1] TYPE OF APPLICATION - Check Those Which Apply for [A]  
 [A] Location - Spacing Unit - Simultaneous Dedication  
 NSL  NSP  SD

Check One Only for [B] or [C]

- [B] Commingling - Storage - Measurement  
 DHC  CTB  PLC  PC  OLS  OLM
- [C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery  
 WFX  PMX  SWD  IPI  EOR  PPR

- [D] Other: Specify \_\_\_\_\_

RECEIVED

AUG 27 2003

Oil Conservation Division

- [2] NOTIFICATION REQUIRED TO: - Check Those Which Apply, or Does Not Apply
- [A]  Working, Royalty or Overriding Royalty Interest Owners
  - [B]  Offset Operators, Leaseholders or Surface Owner
  - [C]  Application is One Which Requires Published Legal Notice
  - [D]  Notification and/or Concurrent Approval by BLM or SLO  
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office
  - [E]  For all of the above, Proof of Notification or Publication is Attached, and/or,
  - [F]  Waivers are Attached

- [3] SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.

- [4] CERTIFICATION: I hereby certify that the information submitted with this application for administrative approval is accurate and complete to the best of my knowledge. I also understand that no action will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

PEGGY COLE  
Print or Type Name

*Peggy Cole*  
Signature

REGULATORY Supr. 8-26-03  
Title Date

peole@br-inc.com  
e-mail Address

# BURLINGTON RESOURCES

SAN JUAN DIVISION

Sent Federal Express

Mr. Michael Stogner  
New Mexico Oil Conservation Division  
1220 South St. Francis Drive  
Santa Fe, New Mexico 87505

Re: Zachry #50  
1846'FNL, 621'FWL Section 35, T-29-N, R-10-W, San Juan County  
API #30-045-25597

**RECEIVED**

AUG 27 2003

Oil Conservation Division

Dear Mr. Stogner:

This is a request for administrative approval for a non-standard gas well location in the Otero Chacra pool.

Burlington Resources plans to recomplete this well in the Otero Chacra formation and commingle with the existing Blanco Mesaverde. The Armenta Gallup formation will be plugged and abandoned. An application will be made to downhole commingle this well. NSL-3372 was issued March 24, 1994 for the Blanco Mesaverde formation in this well.

Production from the Chacra is included in a 160 acre gas spacing unit comprising of the northwest quarter of Section 35.

To comply with the New Mexico Oil Conservation Division rules, we are submitting the following for your approval of this non-standard location:

- C-102 plat showing location of the well;
- Plat showing offset owners/operators;
- Copy of Well Completion Log for original completion;
- Affidavit of notification of offset owners/operators

A copy of this application is being submitted to all offset owners/operators by certified mail with a request that they furnish your Santa Fe office with a Waiver of Objection, and return one copy to this office.

Sincerely yours,



Peggy Cole  
Regulatory Supervisor

Xc: Bureau of Land Management – Farmington Field Office  
Oil Conservation Division – Aztec District Office

## WAIVER

Energen Resources hereby waives objection to Burlington Resource's application for non-standard location for the Zachry #50 as proposed above.

By: \_\_\_\_\_ Date: \_\_\_\_\_

1149

District I  
625 N. French Dr., Hobbs, NM 88240  
 District II  
1301 W. Grand Ave., Artesia, NM 88210  
 District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
1220 S. St Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-102

Oil Conservation Division  
 1220 S. St Francis Dr.  
 Santa Fe, NM 87505

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

API Number 30-045-25597	Pool Name OTERO CHACRA (GAS)	Pool Code 82329
Property Code 7654	Property Name ZACHRY	Well No. 050
OGRID No. 14538	Operator Name Burlington Resources Oil and Gas Company	Elevation 5633

**Surface Location**

UL or Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
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**Bottom Hole Location If Different From Surface**

UL or Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
E	35	29N	10W		1846	N	621	W	San Juan
Dedicated Acres 160		Joint or Infill		Consolidation Code		Order No.			

■			

**OPERATOR CERTIFICATION**

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Signed By:

*Joan Case*

Title: Regulatory Supervisor

Date: 8/4/2003

**SURVEYOR CERTIFICATION**

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Signed By: Michael Daly

Date of Survey: 11/29/1982

Certificate Number: 5992

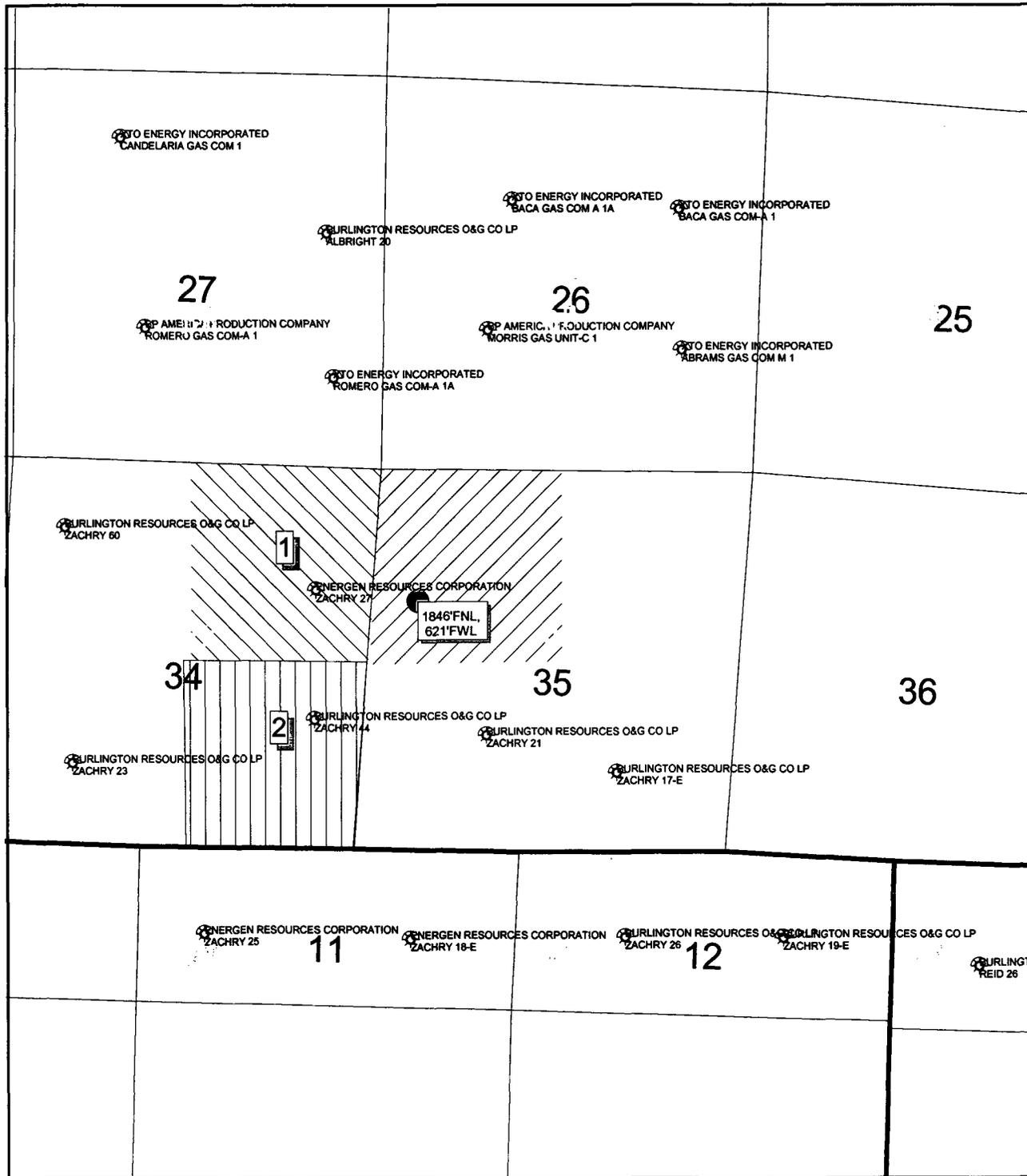
*Standard  
640-ae  
Section*

Re: Zachry #50  
1846'FNL, 621'FWL Section 35, T-29-N, R-10-W, San Juan County  
API #30-045-25597

I hereby certify that the following offset owners/operators have been notified by certified mail of our application for administrative approval for non-standard well location of the above well

Energen Resources  
Att: Rich Corcoran  
2198 Bloomfield Highway  
Farmington, NM 87401

*Jeany Cole*  
8-26-03



- 1 Energen Resources Corp - operator  
Attn: Rich Corcoran  
2198 Bloomfield Hwy  
Farmington, NM 87401
- 2 Burlington Resources O&G Co. LP  
operator & working interest owner

P2000 Wells By Formation 2

- CHACRA
- Sections
- Townships



**BURLINGTON RESOURCES** **PLAT**  
© Unpublished Work, Burlington Resources, Inc.

700 0 700 1400 Feet

<b>BURLINGTON RESOURCES</b>	
San Juan	
Zachry #50 Sec. 35, T-29-N, R-10-W San Juan County, New Mexico NSL Offset Operator Plat Chacra Formation	
Transverse Mercator UTM - 1927 ; Zone 13	1:25538
Prepared By: Tammy Wimsatt	Date: 8/22/2003
File No: _____	Revised: _____
File Name: s:\public\lwz\zachry50.apr	

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE

FOR APPROVED  
OMB NO. 1004-0137  
Expires: December 31, 1991

5. LEASE DESIGNATION AND SERIAL NO.

SF-080724A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME, WELL NO  
Zachry #50

9. API WELL NO.

30-045-25597

10. FIELD AND POOL OR WILDCAT  
Blanco Mesaverde  
Armenta Gallup

11. SEC., T., R., M. OR BLOCK AND SURVEY OR AREA

Sec. 35 T-29-N, R-10-W

12. COUNTY OR PARISH

San Juan

13. STATE

NM

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL: OIL WELL  GAS WELL  DRY  (Other WATER)

b. TYPE OF COMPLETION: NEW WELL  WORK OVER  DEEPEN  PLUG BACK  DIFF. CEMENT  Other NO RECOMPLETION

2. NAME OF OPERATOR

Meridian Oil Inc

3. ADDRESS AND TELEPHONE NO.

PO Box 4289, Farmington, NM 87499 (505) 326-9700

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*

At surface 1846' FNL, 621' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO. NSL-3372 DATE ISSUED

15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (OF. HKB. RT. OR. ETC.)\* 19. SLEV. CASINGHEAD

3-18-83 3-30-83 10-29-94 5645 KB

20. TOTAL DEPTH, MD & TVD 21. PLUG BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY\* 23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS

6060 6014 2 0-6060

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\* 25. WAS DIRECTIONAL SURVEY MADE

3772-4473 Mesaverde

26. TYPE ELECTRIC AND OTHER LOGS RUN 27. WAS WELL CORED

CBL-GR-CCL No

28. CARING RECORD (Report all strings set in well)

CASING SIZE/GRADE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED
9 5/8	36#	359	13 3/4	325 cu. ft.	
7	23#	5332	8 3/4	3518 cu. ft.	

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
4 1/2	5150	6060	168 cu. ft.		1 1/2	4511	4581

31. PERFORATION RECORD (Interval, size and number) 32. ACID, SHOT, FRACTURE CEMENT SQUEEZE, ETC.

INTERVAL	AMOUNT AND KIND OF MATERIAL USED
3772-4026	120,000# 20/40 sd 155,232 gal slk wtr
4221-4473	95,000# 20/40 Ariz sdi 143,766 gal slk wtr

33. PRODUCTION

DATE FIRST PRODUCTION 10-29-94 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing WELL STATUS (Producing or shut-in) SI

DATE OF TEST 10-30-94 HOURS TESTED CROCK SIZE PROD'H. FOR TEST PERIOD OIL—BSL. GAS—MCF. WATER—BSL. GAS-OIL RATIO

1100 Pitof Gauge

FLOW. TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE OIL—BSL. GAS—MCF. WATER—BSL. OIL GRAVITY-API (CORR.)

SI 1077

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

To be sold

35. LIST OF ATTACHMENTS

None

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED [Signature] TITLE Regulatory Affairs DATE 11-23-94

ACCEPTED FOR RECORD

DEC 03 1994

FARMINGTON DISTRICT OFFICE

\*(See instructions and spaces for Additional Data on Reverse Side)

# INSTRUCTIONS

**General:** This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on Items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form; see item 35.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 18:** Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

**Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

**Item 29: "Sacks Cement":** Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

**Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for Items 22 and 24 above.)

## 37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
			Perf 2 sqz holes @ 50'. Sqzd w/70 sx Class

## 38.

## GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
Ojo Alamo	740	
Kirtland	920	
Fruitland	1560	
Pictured Cliffs	1900	
Lewis	2000	
Chacra	2540	
Cliff House	3480	
Point Lookout	4240	
Mancos	4450	
Gallup	5400	
B" cmt. Final pressure 400 psi.		

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

SF 080724-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Zachry

9. WELL NO.

50

10. FIELD AND POOL, OR WILDCAT

Armenta Gallup

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Section 35, T29N-R10W NMPM

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

19. ELEV. CASINGHEAD

5633' GR

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG \***

1a. TYPE OF WELL: OIL WELL  GAS WELL  DRY  Other \_\_\_\_\_

b. TYPE OF COMPLETION: NEW WELL  WORK OVER  DEEP-EN  PLUG BACK  DIFF. RESVR.  Other \_\_\_\_\_

2. NAME OF OPERATOR  
Union Texas Petroleum Corporation

3. ADDRESS OF OPERATOR  
P.O. Box 1290, Farmington, New Mexico 87499

4. LOCATION OF WELL (Report location clearly and in accordance with State requirements)

At surface 1846 ft/North; 621 ft/West  
At top prod. interval reported below Same as above

At total depth Same as above

RECEIVED  
OCT 14 1983  
BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

14. PERMIT NO. DATE ISSUED

15. DATE SPUDDED 3-18-83 16. DATE T.D. REACHED 3-30-83 17. DATE COMPL. (Ready to prod.) 5-16-83 18. ELEVATIONS (DF, REB, RT, GR, ETC.)\* 5645' RKB 19. ELEV. CASINGHEAD 5633' GR

20. TOTAL DEPTH, MD & TVD 6060' 21. PLUG, BACK T.D., MD & TVD 6014' 22. IF MULTIPLE COMPL., HOW MANY\* 23. INTERVALS DRILLED BY 0-6060' ROTARY TOOLS CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*  
5846'-5991' Gallup  
5418'-5738' Gallup 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN CDL-CNL-GR, DIL-GR 27. WAS WELL CORED No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9-5/8"	36	349'	13-3/4"	325 cu. ft.	
7"	23	5332'	8-3/4"	3518 cu. ft.	
4-1/2"	10.5	5150'-6060'	6-1/4"	169 cu. ft.	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
4-1/2"	5150'	6060'	169 cu. ft.		2-3/8"	5903'	

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
INTERVAL	HOLES	DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5846' - 5991'	17 holes	5846'-5991'	See Attachment
5418' - 5738'	26 holes	5418'-5738'	See Attachment

33. PRODUCTION  
DATE FIRST PRODUCTION 5-27-83 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping WELL STATUS (Producing or shut-in) Producing

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
6-23-83	24	1-1/4"	→	27	175	1	6481

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
40	350	→	27	175	1	40°

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold TEST WITNESSED BY Bennie Brown

35. LIST OF ATTACHMENTS  
Cementing and Stimulation Records

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records  
SIGNED J.A. Edmister TITLE Engineering Analyst DATE OCT 14 1983

\*(See Instructions and Spaces for Additional Data on Reverse Side) FARMINGTON-RESOURCE AREA  
**OPERATOR** BY Sm

# INSTRUCTIONS

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**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 18:** Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

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**Item 29: "Sacks Cement":** Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

**Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

## 37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.

## 38.

## GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
Ojo Alamo	740	
Kirtland	920	
Fruitland	1560	
Pictured Cliffs	1900	
Lewis	2000	
Chacra	2540	
Cliff House	3480	
Point Lookout	4240	
Mancos	4450	
Gallup	5400	



○ 1846'FNL, 621'FWL

 Sections  
 Townships



**BURLINGTON RESOURCES**  **PLAT**

300 0 300 600 Feet  


***BURLINGTON RESOURCES***  
**San Juan**

Zachry #50  
Sec. 35, T-29-N, R-10-W  
San Juan County, New Mexico  
Aerial Photography

Transverse Mercator  
UTM - 1927 ; Zone 13

1:12382

Prepared By: Tammy Wimsatt

Date: 07/09/2003

File No: \_\_\_\_\_

Revised: \_\_\_\_\_

File Name: s:\public\tw\zachry50.apr

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0135  
Expires: November 30, 2000

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*

5. Lease Serial No.  
NMSF080724A

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

7. If Unit or CA/Agreement, Name and/or No.

1. Type of Well  
 Oil Well  Gas Well  Other

8. Well Name and No.  
ZACHRY 50

2. Name of Operator **BURLINGTON RESOURCES O&G CO LP** Contact: **PEGGY COLE**  
E-Mail: pcole@br-inc.com

9. API Well No.  
30-045-25597-00-D1

3a. Address  
3401 EAST 30TH  
FARMINGTON, NM 87499

3b. Phone No. (include area code)  
Ph: 505.326.9727  
Fx: 505.326.9781

10. Field and Pool, or Exploratory  
ARMENTA

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 35 T29N R10W SWNW 1846FNL 0621FWL  
36.68477 N Lat, 107.86061 W Lon

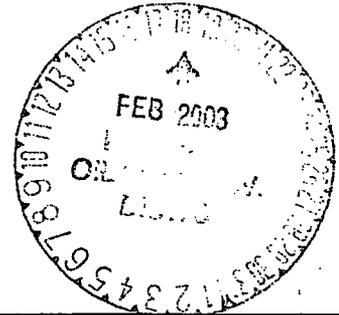
11. County or Parish, and State  
SAN JUAN COUNTY, NM

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

It is intended to remove the existing dual tubing configuration and recomplete the subject well in the Chacra formation. The existing Mesaverde and Gallup formations will be isolated and the Chacra formation will be perforated and stimulated. The wellbore will be cleaned out to plug back total depth. The well will then be commingled. A down hole commingled application will be submitted.



14. I hereby certify that the foregoing is true and correct.  
**Electronic Submission #17772 verified by the BLM Well Information System For BURLINGTON RESOURCES O&G CO LP, sent to the Farmington Committed to AFMSS for processing by Steve Mason on 02/13/2003 (03SXM0304SE)**

Name (Printed/Typed) **PEGGY COLE** Title **REGULATORY ADMINISTRATOR**

Signature (Electronic Submission) Date **01/20/2003**

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By **STEPHEN MASON** Title **PETROLEUM ENGINEER** Date **02/13/2003**

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office **Farmington**

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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.

**\*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\***