

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

2005 JAN 31 PM 3 24

Sundry Notices and Reports on Wells

070 FARMINGTON NM

1. Type of Well
GAS

5. Lease Number:
NMSF-079383

2. Name of Operator:
BURLINGTON RESOURCES, INC.

6. If Indian, allottee or Tribe Name:

2. Name and Phone No. of Operator:
P. O. Box 4289, Farmington, NM 87499
(505) 326-9700

7. Unit Agreement Name:
SAN JUAN 30-6 UNIT

8. Well Name and Number:
SAN JUAN 30-6 UNIT

95A

9. API Well No.
30039216990000

4. Location of Well, Footage, Sec., T, R, U:
790' FNL & 790' FWL
S:26 T:030N R:007W D

10. Field and Pool:
MV / BLANCO MESAVERDE (PRORATED GAS)

11. County and State:
Rio Arriba New Mexico

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

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Non-Routine Fracturing
<input type="checkbox"/> Abandonment	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Water Shut Off
<input checked="" type="checkbox"/> Other - Re-Delivery	<input type="checkbox"/> Conversion to Injection	

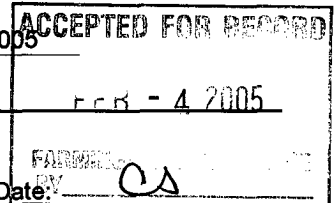
FEB - 4 2005

13. Describe Proposed or Completed Operations:

This well was re-delivered after being turned off for more than 90 days on 1/26/2005 and produced an initial MCF of 1100.

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

Signed Renaey Beyale Date: 1/31/2005



(This space for Federal or State Office use.)

APPROVED BY: _____ Title: _____

Date: _____

CONDITIONS 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.

NMOC