

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

## SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT" - for such proposals.

RCVD JAN 12 '12

OIL CONS. DIV.

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

DIST 3  
RECEIVED

JAN 09 2012

## 1. Type of Well:

Gas

## 2. Name of Operator:

BURLINGTON RESOURCES OIL &amp; GAS COMPANY LP

## 3. Address and Phone No. of Operator:

P. O. Box 4289, Farmington, NM 87499  
(505) 326-9700

## 4. Location of Well, Footage, Sec. T, R, U:

FOOTAGE: 1030' FSL &amp; 1540' FEL

S: 33 T: 029N R: 007W U: O

## 5. Lease Number:

SF-079514

Farmington Field Office  
Bureau of Land Management

## 6. If Indian, allottee or Tribe Name:

## 7. Unit Agreement Name:

NMNM78417A(MV) NMNM78417B(DK)

## 8. Well Name and Number:

SAN JUAN 29-7 UNIT 77A

## 9. API Well No.

3003921919

## 10. Field and Pool:

DK - BASIN::DAKOTA

MV - BLANCO::MESAVERDE

## 11. County and State:

RIO ARRIBA, NM

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

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Recompletion	<input type="checkbox"/> Change of Plans
<input checked="" 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

## 13. Describe Proposed or Completed Operations

This well was re-delivered on 11/8/2011 and produced natural gas and entrained hydrocarbons.

Notes: THIS WELL WAS SHUT IN MORE THAN 90 DAYS DUE TO NEW DRILL SAN JUAN 29-7 UNIT 77N.

TP: 334

CP: 324

Initial MCF: 699

Meter No.: 93360

Gas Co.: ENT

Proj Type.: REDELIVERY

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

Signed

*Tamra Sessions*  
Tamra Sessions

Title: Staff Regulatory Tech.

Date: 1/6/2012

(This Space for Federal or State Office Use)

ACCEPTED FOR RECORD

APPROVED BY:

Title:

Date:

JAN - 9 2012

CONDITION OF APPROVAL, if any:

FARMINGTON FIELD OFFICE  
BY *[Signature]*

NMOCDA