submitted in lieu of Form 3160-5

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

	BUREAU OF LAND MANAGEMENT		
	Sundry Notices and Reports on Wells		
		5.	Lease Number
1.	Type of Well GAS	6.	NMSF-078439 If Indian, All. or Tribe Name
2.	Name of Operator	7.	Unit Agreement Name
۷.	BURLINGTON  RESCURCES OIL & GAS COMPANY IF 2005	0	W. H. Y. O. N. I.
3.	Address & Phone No. of Operator	<del></del> 8.	Well Name & Number
	PO Box 4289, Farmington, NM 87499 (505) 326-9700	9.	Johnston Federal #29S API Well No.
4.	Location of Well, Footage, Sec., T, R, M		30-045-32131
	Sec., TN, RW, NMPM	10.	Field and Pool
	Unit O (SWSE), 880' FSL & 1385' FWL, Section 7, T31N, R9W, NMPM	Basi	n Fruitland Coal
	ome o (SWEE), door Feel at 1965 F. W.E., Seedon 7, 1911, 10 W, 1011 M	11.	County and State San Juan Co., NM
12	. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, O	OTHER 1	DATA
	Type of Submission     Type of Action       Notice of Intent     Abandonment     Change of Plans       Recompletion     New Construction       Yes     Plugging     Non-Routine Fracturing       Casing Repair     Water Shut off       Final Abandonment     Altering Casing     Conversion to Injection		Other – &" casing report
 13	. Describe Proposed or Completed Operations		
ST of Le & an	28/05 RIH w/8-3/4" bit & C/O cement from 105' – 150'. Drilled to intermediate TD @ 328.    &C casing and set @ 3278'. RU to cement. Pumped a preflush of 10 bbls gel water, 2 bbl. 9 sx (27 cf – 4.83 bbl slurry) Premium Lite HS FM w/3% CaCl2, .25#/sx Celloflake, 5#/sx ad cement w/389 sx (829 cf – 147.84 bbl slurry) Premium Lite HS FM w/3% CaCl2, 0.25#/s 0.4% SMS. Tailed w/90 sx (124 cf – 22.13 bbls) Type III cement w/1% CaCl2, 0.25#/sx Ced displaced w/130.9 bbls FW, Bumped plug w/1214#. @ 0930 hrs 3/31/05. Circ. 46 bbls to 1530 hrs 3/31/05.	ls FW & t LCM-1 & sx Flocellelloflake,	then Lead scavenger cement & 0.4% FL-52, 0.4% SMS. le, 5#/sx LCM-1, 0.4% FL-52 0.2% FL-52. Dropped plug
W	ill show 7" casing PT on next report. The PT will be conducted by the completion rig before		R
14	I. I hereby certify that the foregoing is true and correct.	N O	
Sig	gned Active Cluston Tipe CGEPTED FO	R REGI	RE
	his space for Federal or State Office use)  PROVED BYTitleTarget for Farming 10h r	IELU OFF	ICE Date
CC	DNDITION OF APPROVAL, if any:  18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make any department or agency of United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.		