

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

AUG 06 2013

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS OF LAND
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. **SF-078424**
6. Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well
 Oil Well Gas Well Other

7. If Unit of CA/Agreement, Name and/or No.
San Juan 29-7 Unit

2. Name of Operator
Burlington Resources Oil & Gas Company LP

8. Well Name and No.
San Juan 29-7 Unit 528S

3a. Address
PO Box 4289, Farmington, NM 87499

3b. Phone No. (include area code)
(505) 326-9700

9. API Well No.
30-039-29852

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Surface UL: D (NWNW), 750' FNL & 770' FWL, Sec. 27, T29N, R7W

10. Field and Pool or Exploratory Area
Basin FC / Blanco PC

11. Country or Parish, State
Rio Arriba New Mexico

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" 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 type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Legacy</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Reclamation
	<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 must 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 must be filed once Testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Burlington Resources Oil & Gas Company LP completed the Legacy Reclamation of the Location on 7/17/13, as requested by Mike Flaniken during the onsite inspection. Please schedule a field inspection to verify Burlington Resources has met the BLM requirements on this reclamation work.

OIL CONS. DIV DIST. 3

OCT 29 2013

ACCEPTED FOR RECORD

OCT 25 2013

FARMINGTON FIELD OFFICE
BY _____

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

Kenny Davis

Title

STAFF REGULATORY TECHNICIAN

Signature

Date

8/2/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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

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.

(Instruction on page 2)

NMOCDC
ca

d/b



Legacy

Reclamation Form:

Date: 7-31-13

Well Name: S3 29-7 5285

Footages: 750 FWH, 770 FWH Unit Letter: _____

Section: 27, T-29-N, R-7-W, County: RA State: NM

Reclamation Contractor: Aztec

Reclamation Start Date: 7-17-2013

Reclamation Complete Date: 7-17-2013

Road Completion Date: 7-17-2013

Seeding Date: 7-18-2013

**PIT MARKER STATUS (When Required): Picture of Marker set needed

MARKER PLACED: _____ (DATE)

LATITUDE: _____

LONGITUDE: _____

Pit Manifold removed _____ (DATE)

Construction Inspector: Norman Faver Date: 7-31-13

Inspector Signature: Norman Faver

Office Use Only: Subtask _____ DSM _____ Folder _____ Pictures _____

SS 29-7 528S

