

Submitted in lieu of Form 3160-5 (June 1990)

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.

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

RECEIVED

JUN 24 2014

Farmington Field Office
Bureau of Land Management

1. Type of Well:

Gas

2. Name of Operator:

BURLINGTON RESOURCES OIL & GAS COMPANY LP

3. Address and Phone No. of Operator:

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

5. Lease Number:

NMSF-078000A

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name:

NMNM-78395C

8. Well Name and Number:

HUERFANO UNIT 193

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

FOOTAGE: 1790' FSL & 1650' FEL
S: 29 T: 026N R: 009W U: J

9. API-Well No.:

3004520395

10. Field and Pool:

DK - BASIN::DAKOTA

11. County and State:

SAN JUAN, 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 6/2/2014 and produced natural gas and entrained hydrocarbons.

Notes: RE-DELIVERED SHUT IN FOR MORE THAN 90 DAYS DUE TO DOWNHOLE ISSUES

OIL CONS. DIV DIST. 3

JUN 27 2014

TP: 324 CP: 370 Initial MCF: 3

Meter No.: 75967

Gas Co.: ENT

Proj Type.: REDELIVERY

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

Signed

Denise Journey

Title: Staff Regulatory Tech.

Date: 6/4/2014

ACCEPTED FOR RECORD

(This Space for Federal or State Office Use)

APPROVED BY:

Title:

Date:

JUN 25 2014

FARMINGTON FIELD OFFICE
BY: *cm*

CONDITION 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.

NMOCD A