

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

2005 SEP 14 PM 3 38

Sundry Notices and Reports on Wells

RECEIVED  
070 FARMINGTON NM

**1. Type of Well**  
GAS

**5. Lease Number:**  
NMNM-03179

**2. Name of Operator:**

BURLINGTON RESOURCES, INC.

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

**7. Unit Agreement Name:**

**2. Name and Phone No. of Operator:**

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

**8. Well Name and Number:**

AZTEC

8E

**9. API Well No.**

30045237510000



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

1490' FNL & 1190' FEL

S:14 T:028N R:011W H

**10. Field and Pool:**

DK / BASIN DAKOTA (PRORATED GAS)

**11. County and State:**

San Juan

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	

**13. Describe Proposed or Completed Operations:**

This well was re-delivered after being turned off for more than 90 days on 8/30/2005 and produced an initial MCF of 100.

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

Signed

*Renee Beyale*  
Renee Beyale

Date:

9/13/2005

(This space for Federal or State Office use.)

APPROVED BY:

Title:

Date:

NOV 7 2005

CONDITIONS OF APPROVAL, if any:

**ACCEPTED FOR RECORD**

**FARMINGTON DISTRICT OFFICE**

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