

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

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

DEC 09 2016

SUNDRY NOTICES AND REPORTS ON WELLS

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

Farmington Field Office
Bureau of Land Management

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.

1. Type of Well:

Gas

5. Lease Number:

NM-03017

2. Name of Operator:

BURLINGTON RESOURCES OIL & GAS COMPANY LP

6. If Indian, allottee or Tribe Name:

3. Address and Phone No. of Operator:

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

7. Unit Agreement Name:

8. Well Name and Number:

HUERFANO UNIT 231

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

FOOTAGE: 1050' FNL & 800' FWL
S: 06 T: 026N R: 009W U: D

OIL CONS. DIV DIST. 3

9. API Well No.

3004521117

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10. Field and Pool:

FRC - BASIN CB::FRUITLAND COAL

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 12/5/2016 and produced natural gas and entrained hydrocarbons.

Notes: REDELIVERED / SHUT IN FOR MORE THAN 90 DAYS DUE TO EQUIPMENT ISSUE / RETURNED TO PRODUCTION

TP: 86 CP: 86 Initial MCF: 103

Meter No.: 97846

Gas Co.: ENT

Proj Type.: REDELIVERY

ACCEPTED FOR RECORD

DEC 13 2016

FARMINGTON FIELD OFFICE
BY: *[Signature]*

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

Signed

[Signature]
Dollie Busse

Title: Staff Regulatory Tech.

Date: 12/6/2016

(This Space for Federal or State Office Use)

APPROVED BY: _____ Title: _____ Date: _____

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.

NMOCDF