

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.

RECEIVED

JUL 27 2017

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

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

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

FOOTAGE: 110' FNL & 1700' FEL

S: 09 T: 027N R: 004W U: B

OIL CONS. DIV DIST. 3

AUG 10 2017

5. Lease Number:

SF-080668

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name:

8. Well Name and Number:

SAN JUAN 27-4 UNIT 139N

9. API Well No.

3003930438

10. Field and Pool:

DK - BASIN::DAKOTA

MV - BLANCO::MESAVERDE

11. County and State:

RIO ARRIBA, 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 7/18/2017 and produced natural gas and entrained hydrocarbons.

Notes: WELL WAS SHUT IN FOR MORE THAN 90 DAYS FOR SURFACE EQUIPMENT REPAIRS.

TP: 360

CP: 360

Initial MCF: 711

Meter No.: 82264

Gas Co.: WFC

Proj Type.: REDELIVERY

ENTERED INTO AFMSS

JUL 31 2017

BY: William Tambekou

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

Signed

Kristina Brock

Title: Staff Regulatory Tech.

Date: 7/26/2017

(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.

NMOCD