submitted in lieu c			•			
b.	UNI: DEPARTMEN	FED STATE:				
-		F LAND MAI				
	Georgiana Natida			**************************************		
	Sundry Notio	ces and Re	eports on	Wells		
					5.	Lease Number
1. Type of Well		9170	1 18 m	2: 52	6.	NMSF-079391 If Indian, All. or
GAS					0.	Tribe Name
		07	o Farridgi	in, NM	_	
2. Name of Operator	•	· · · · · · · · · · · · · · · · · · ·		The second secon	7.	Unit Agreement Name
BURLINGTO			ART S			
RESOURCE	S OIL & GAS C	OMPANY LP		July 1 to the		San Juan 27-5 Unit
					8.	Well Name & Number
 Address & Phone PO Box 4289, Fa 	_		05) 326-97	00	9.	San Juan 27-5 U #112: API Well No.
FO BOX 4205, Fa	irmingcon, mi	0/400 (3	\(\(\sigma\)		j .	30-039-26614
4. Location of Well					10.	Field and Pool
2485'FNL, 2445'F	WL, Sec.8, T-2	27-N, R-5	-W, NMPM	7-15-07-01 (1)	11.	Blanco MV/Basin DK County and State
			and a second	Controlly divin		Rio Arriba Co, NM
12. CHECK APPROPRIA	TE BOY TO TAID	TCATE NAT	TIPE OF NOT	TOP PEROPT	\THED	DATA
Type of Submissi	.on	LONE IIII		Action		DRIN.
$_{\tt X_}$ Notice o	of Intent		donment	Change		
Subseque	ent Report		mpletion ging Back	New Con		tion Fracturing
- -	_	Casi	ng Repair	Water S	hut of	Ef
Final Ab	pandonment		ring Casin r - Commin		ion to	o Injection
13. Describe Prop	osed or Comple	eted Oper	ations			
It is intende	ed to recomple	te the su	bject well	to the Mesav	erde :	formation as follows:
1 Move in ar	nd rig up. Pull	lout of	hole with	production tu	hina	
2. Trip in ho	ole with CIBP,	set at 5	800' to is	olate Dakota :		rations.
3. Perforate	Point Lookout stimulate the 1	at appro	ximately 5	498'-5720'.	and a	nd 60 minlitur
slick w	vater foam. TO	OH.				
5. Trip in ho	ole with CIBP,	set at 5	474' to is	olate Point L	ookout	t perforations.
	the Cliff Hous timulate the G					of sand and 60
quality	slick water :	foam.			•	
8. Trip in ho TOOH.	ole with tubing	g, mill,	and bit to	drill out pl	ugs a	nd clean out to PBTD.
	ole with produc	ction tub	ing. Rig d	own.		
Well will be	completed as	. Mesaver	de and Dak	ota commingle	Δd	own hole commingle
	cation will be			oca commingre	. <i>n</i> u	Jwii note commingte
			OF APPRO			
	Adh	ere to previou	sly issued stipu	iations.		
14. I hereby cert	ify that the	foregoing	is true a	nd correct.		
Signed Nincy Ol	tingenes	Title	Senior Sta	ff Specialist	1	Date 10/30/03
	1					
(This space for Fed APPROVED BY	/	Office u		-Fra Da	te •	10/02
CONDITION OF APPROV	AL, if any:	***	<u>reh</u>	Da Da	<u> </u>	117/52
Title 18 U.S.C. Section 1001, m	akes it a crime for any	person knowing	aly and willfully	to make any departmen	t or age	ncy of
the United States any false, fi	ctitious or fraudulent	statements or i	representations a	s to any matter within	its juri	isdiction.

U1STRICT 1 PO Box 1980, Hobbs, NM 88241-1980

. District ÍÍ. PO D∺awer DD, Artesia, NM 88211–0719

District III 1000 Rio Brazos Rd. Aztec. NM 87410

District IV PO Box 2088, Santa Fe, NM 87504-2088 State of New Mexico Energy, Minerals & Natural Resources Depar

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088 Form C-102 Revised February 21, 1994 Instructions on back Submit to Appropriate District Office

Submit to Appropriate District Office State Lease – 4 Copies Fee Lease – 3 Copies

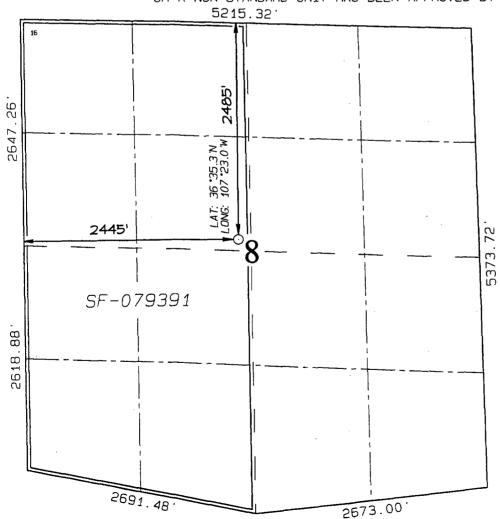
_ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

'API Number	Pool Code	³Pool Name		
30-039-26614	72319/71599	Blanco Mesaverde/Basin Dakota	•	
¹Property Code	°Pr	*Property Name		
7454	SAN JU	112F		
'OGRID No.	° Or	*Operator Name		
14538	BURLINGTON RESOU	RCES OIL & GAS COMPANY	6599	
	40			

¹⁰ Surface Location North/South line UL or lot no. Section Township Range Lot Ion Feet from the Feet from the East/West line RIO 8 27N 5W 2485 NORTH 2445 WEST ARRIBA ¹¹Bottom Hole Location If Different From Surface UL or lot no. Range Lot Idn Feet from the North/South line Feet from the East/West line County Section 13 Joint or Infill ¹⁴ Consolidation Code ¹⁵ Order No. 12 Dedicated Acres MV-W/320 DK-W/320

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief
Signature of Oltmanns
Nancy Oltmanns
Printed Name
Senior Staff Specialist Title
10-30-03 Date
18 SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plant was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.
SEPTEMBER 19, 2000
Date of Comment
Signature and Sept deprofessional Mapor
/C ED4>