

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.

RECEIVED

OCT 05 2009

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

Bureau of Land Management
Farmington Field Office

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: 2210' FSL & 125' FWL

S: 32 T: 028N R: 006W U: L

5. Lease Number:

SF-079051

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name:

8. Well Name and Number:

SAN JUAN 28-6 UNIT 132P

9. API Well No.

3003929426

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 9/30/2009 and produced natural gas and entrained hydrocarbons.

Notes: THIS WELL WAS RECOMPLETED TO THE MESAVERDE AND COMMINGLED WITH THE EXISTING DAKOTA

TP: 554 CP: 593 Initial MCF: 394

Meter No.: 83807

Gas Co.: WFS

Proj Type.: RECOMPLETE

RCVD OCT 7 '09

OIL CONS. DIV.

DIST. 3

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

Signed

Tamra Sessions

Title: Staff Regulatory Tech.

Date: 9/30/2009

(This Space for Federal or State Office Use)

APPROVED BY:

Title:

Date:

OCT - 6 2009

CONDITION OF APPROVAL, if any:

FARMINGTON FIELD OFFICE
BY *[Signature]*

OPERATOR
NMOCD