

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

Sundry Notices and Reports on Wells

1. **Type of Well**
GAS

RECEIVED

DEC 18 2009

Bureau of Land Management
Farmington Field Office

2. **Name of Operator**
BURLINGTON
RESOURCES OIL & GAS COMPANY LP

3. **Address & Phone No. of Operator**

PO Box 4289, Farmington, NM 87499 (505) 326-9700

4. **Location of Well, Footage, Sec., T, R, M**

Surf: Unit A (NENE), 930' FNL & 790' FEL, Section 34, T30N, R8W, NMPM

5. **Lease Number**
SF - 078385 - A
6. **If Indian, All. or Tribe Name**
7. **Unit Agreement Name**
8. **Well Name & Number**
Howell L 304
9. **API Well No.**
30-045-28791
10. **Field and Pool**
Basin FC
11. **County and State**
San Juan Co., NM

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

Type of Submission	Type of Action	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input checked="" type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection

☒ Other - FAN

13. Describe Proposed or Completed Operations

This well was P & A on 9/23/2005. Reclamation was done and is now ready for final closure approval. Please remove this well from Burlington Resources Oil & Gas Company bond.

RCVD JAN 7 '10
OIL CONS. DIV.
DIST. 3

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

Signed Jamie Goodwin Title Regulatory Technician Date 12/16/2009

(This space for Federal or State Office use)

APPROVED BY Bruce Innes Title Branch Chief Date 1/5/2010
CONDITION OF APPROVAL, if any: Environmental Protection and Realty

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

SCW

OPERATOR

PC