

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO. 1004-0135  
Expires: November 30, 2000**SUNDRY NOTICES AND REPORTS ON WELLS**  
**Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.****SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

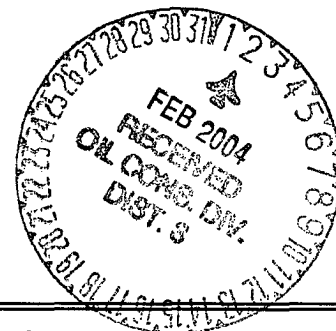
1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMSF078197
2. Name of Operator BURLINGTON RESOURCES O&G CO LP		6. If Indian, Allottee or Tribe Name
3a. Address PO BOX 4289 FARMINGTON, NM 87499		7. If Unit or CA/Agreement, Name and/or No. NMNM73878
3b. Phone No. (include area code) Ph: 505.599.4068 Fx: 505.326.9880		8. Well Name and No. ROCK ISLAND FEDERAL 1M
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 9 T29N R10W NESE 1775FSL 1020FEL 36.74166 N Lat, 107.86806 W Lon		9. API Well No. 30-045-31737-00-X1
		10. Field and Pool, or Exploratory Multiple--See Attached
		11. County or Parish, and State SAN JUAN COUNTY, NM

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

1/10/04 Drill to intermediate TD @ 3976'. Circ hole clean. TOOH. TIH w/92 jts 7" 20# J55 8RD ST&C csg set @ 3966'.  
1/11/04 Cmtd w/486 sxs Premium Lite w/3% calcium chloride, .25 pps celloflake, 5 pps LCM-1, 0.4% fluid loss, 0.4% SMS (1035 cu ft). Tail w/ 90 sxs Type III cmt w/1% calcium chloride, .25 pps celloflake, 0.2% fluid loss (124 cu ft). Displaced w/159 bbls wtr. Circ 48 bbls cmt to surface. WOC. PT BOP & csg to 1500 psi/30 min. OK. Drilling ahead.  
1/13/04 Drill to TD @ 6700'. Blow well clean. TOOH. TIH w/154 jts 4 1/2" 10.5# J55 ST&C csg set @ 6697'. Cmtd w/9 sxs Premium Lite HS FM w/.25 pps celloflake, 0.3% CD-32, 6.25 pps LCM-1, 1% fluid loss (28 cu ft). Tail w/ 268 sxs Premium Lite HS FM w/.25 pps celloflake, 0.3% CD-32, 6.25 pps, fluid loss 1% (531 cu ft). Displace w/107 bbls wtr. ND BOP.



14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #27022 verified by the BLM Well Information System For BURLINGTON RESOURCES O&amp;G CO LP, sent to the Farmington Committed to AFMSS for processing by ADRIENNE GARCIA on 01/29/2004 (04AXG0243SE)</b>	
Name (Printed/Typed) TAMMY WIMSATT	Title REGULATORY SPECIALIST
Signature (Electronic Submission)	Date 01/22/2004

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

<b>ACCEPTED</b>		(BLM Approver Not Specified) Title <b>/s/ Adrienne Garcia</b>	Date 01/29/2004
Approved By _____		Office Farmington	
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.			

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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 or representations as to any matter within its jurisdiction.

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\*****NMOCD**

**Additional data for EC transaction #27022 that would not fit on the form**

**10. Field and Pool, continued**

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**32. Additional remarks, continued**

NU WH. RD. Rig released.

A CBL will be ran at a later date to determine TOC.