

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well
GAS

2. Name of Operator

**BURLINGTON
RESOURCES**

OIL & GAS COMPANY

3. Address & Phone No. of Operator

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

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

1284' FNL, 1284' FWL Sec. 10, T-25-N, R-08-W, NMPM

5. Lease Number
NM-04224

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
Quitau #7

9. API Well No.
300450550300

10. Field and Pool
Ballard PC

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 checked="" 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 type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back	<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
	<input checked="" type="checkbox"/> Other - Restimulation	

13. Describe Proposed or Completed Operations

1. Pull 1" tubing.
2. Clean out (drill out) from 2,242' - 2,377'.
3. Run OH log.
4. Run 2-7/8" casing to new TD and cement to surface w/ 418.4 cu.ft. of cement.
Lead: 184 sks Class "B/G" w/ 2% sodium metasilicate, 5 pps gilsonite,
1/4 pps cellophane. Tail: 25 sks Class "B/G" w/ 1% sodium metasilicate,
5 pps gilsonite, 1/4 pps cellophane.
5. Selectively perforate, acidize, and foam fracture Pictured Cliffs formation.
6. Clean out well.
7. Return well to production.

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

Signed *Regan Cole* Title Regulatory Administrator Date 12/28/99

(This space for Federal or State Office use)

APPROVED BY *Chp Hanadan* Title Acting Team Lead Date 1/13/00
CONDITION OF APPROVAL, if any: