

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
BLM

Sundry Notices and Reports on Wells 99 APR -1 PM 1:46

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
1700' FSL, 1840' FWL, Sec.27, T-27-N, R-5-W, NMMPM

5. Lease Number
070 FARMINGTON, NM SR 1079394

6. If Indian, All. or Tribe Name

7. Unit Agreement Name

8. Well Name & Number
San Juan 27-5 Unit
San Juan 27-5 U #128

9. API Well No.
30-039-20363

10. Field and Pool
Blanco MV/Basin DK

11. County and State
Rio Arriba Co, NM

RECEIVED
MAY 24 1999
OIL CON. DIV.
DIST. 3

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 checked="" 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 - Commingle	

13. Describe Proposed or Completed Operations

It is intended to recomplete the Mesaverde formation in the subject well as follows:

MIRU, ND WH, NU BOP and pull the production tubing. A CIBP will be set at approximately 6200' above the Dakota formation. The Mesaverde will be perforated and fracture stimulated in the following intervals: 4059-4721', 4914-5321', 5391-5659'. After stimulation flowback, the CIBP above the Dakota formation will be drilled out and tubing landed at approximately 7669'. The well will then be commingled. A down-hole commingle application has been submitted.

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

Signed [Signature] Title Regulatory Administrator Date 3/31/99

(This space for Federal or State Office use)
APPROVED BY IS/Duane W. Spencer Title Team Lead, Petroleum Management Date 4-21-99
CONDITION OF APPROVAL, if any:

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.

(E)

NMOGD

V

District I
 PO Box 1980, Hobbs, NM 88241-1980
 District II
 PO Drawer 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 Department

Form ()
 Revised February 21,
 Instructions on
 Submit to Appropriate District ()
 State Lease - 4 C
 Fee Lease - 3 C

OIL CONSERVATION DIVISION

PO Box 2088
 Santa Fe, NM 87504-2088 - 1 PM 1:46

070 F. J. ...

AMENDED RE

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-039-20363		Pool Code 72319/71599		Pool Name Blanco Mesaverde/Basin Dakota	
Property Code 7454		Property Name San Juan 27-5 Unit			Well Number 128
OGRID No. 14538		Operator Name Burlington Resources Oil & Gas Company			Elevation 6511' G

10 Surface Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
K	27	27N	5W		1700	South	1840	West	RA

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County

Dedicated Acres MV-W/300.51 DK-S/310.51	Spit or Infill .51	Consolidation Code	Order No.
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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

16	Original plat from David O. Villven 2-16-71			17 OPERATOR CERTIFICATE <i>I hereby certify that the information contained here true and complete to the best of my knowledge and</i>
	Signature <i>Peggy Bradford</i>			
	Printed Name Peggy Bradford			
	Title Regulatory Administrator			
Date 3-31-99				
1840'	1700'	18 SURVEYOR CERTIFICATE <i>I hereby certify that the well location shown on this was plotted from field notes of actual surveys made or under my supervision, and that the same is true correct to the best of my belief.</i>		
		Date of Survey		
		Signature and Seal of Professional Surveyor:		
		Certificate Number		

OK @