

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

Sundry Notices and Reports on Wells

99 JUL 29 PM 1:42

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

1850' FSL, 790' FWL, Sec. 18, T-28-N, R-4-W, NMPM

5. Lease Number
NM-03862

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
San Juan 28-4 U #26

9. API Well No.
30-039-07420

10. Field and Pool
Blanco Mesaverde

11. County and State
Rio Arriba Co, NM

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

Type of Submission

☐ Notice of Intent☒ Subsequent Report☐ Final Abandonment

Type of Action

☐ Abandonment☐ Recompletion☐ Plugging Back☐ Casing Repair☐ Altering Casing☒ Other - Pay add☐ Change of Plans☐ New Construction☐ Non-Routine Fracturing☐ Water Shut off☐ Conversion to Injection

13. Describe Proposed or Completed Operations

7-20-99 MIRU. ND WH. NU BOP. SDON.

7-21-99 TOO H w/218 jts tbq. TIH w/CIBP & pkr, set @ 6630'. Load hole w/300 bbl 2% KCl wtr. Set pkr. PT CIBP to 3600 psi, OK. PT csg annulus to 500 psi, OK. Release pkr. Pump 10 bbl 15% HCl across Cliff House interval. TOO H w/pkr. TIH, ran CBL-CCL-GR @ 4648-6630', TOC @ 4648'.

7-22-99 MIRU. TIH, perf Cliff House/Menefee w/1 SPF @ 6274, 6276, 6286, 6297, 6299, 6313, 6315, 6321, 6323, 6326, 6328, 6356, 6358, 6392, 6396, 6453, 6454, 6456, 6496, 6498, 6536, 6538, 6554, 6556, 6563, 6565, 6596, 6598, 6612, 6614' w/30 0.29" diameter holes total. Acidize w/25 bbl 15% HCl. SDON.

7-23-99 Frac Cliff House/Menefee w/117,000 gal slk wtr, 100,000# 20/40 Arizona sd. TIH w/4 3/4" bit. CO to 5620'.

7-24/25-99 Blow well & CO.

7-26-99 Blow well & CO. Drill CIBP @ 6630'. TIH, blow well & CO to PBTD @ 6850'. TOO H. TIH, blow well & CO.

7-27-99 Blow well & CO. TOO H. TIH w/219 jts 2 3/8" 4.7# J-55 EUE tbq, landed @ 6832'.

7-28-99 ND BOP. NU WH. RD. Rig released.

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

Signed [Signature] Title Regulatory Administrator Date 7/28/99
no

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

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.

Q 1091

NMOC

[Signature]

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