

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM 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. SF-078399	
2. Name of Operator BURLINGTON RESOURCES OIL & GAS		6. If Indian, Allottee or Tribe Name	
Contact: PEGGY COLE E-Mail: pcoled@br-no.com		7. If Unit or CA/Agreement, Name and/or No. SAN JUAN 29-7 UNI	
3a. Address 3401 EAST 30TH FARMINGTON, NM 87402		8. Well Name and No. SAN JUAN 29-7 UNIT 177	
3b. Phone No. (include area code) Ph: 505.326.9727 Fx: 505.326.9563		9. API Well No. 30-039-26723	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 22 T29N R7W Mer SWNE 1475FNL 1940FEL		10. Field and Pool, or Exploratory BLANCO PICTURED CLIFFS	
		11. County or Parish, and State RIO ARRIBA 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"/> DRG
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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 recomple 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.)

8-12-01 MIRU. ND WH. NU BOP. TIH w/motor. PT BOP & csg to 600 psi/30 min, OK. Drill out csg shoe @ 138'. Drilling ahead.
8-16-01 Drill to TD @ 3924'. Circ hole clean. TOOH. TIH, ran logs.
8-17-01 Ran logs. TOOH. TIH w/124 jts 2 7/8" 6.5# J-55 csg, set @ 3909'. Pump 10 bbl 10% calcium chloride, 5 bbl wtr, 20 bbl flow guard, 5 bbl wtr, 10 bbl 10% calcium chloride, 5 bbl wtr, 20 bbl flow guard, 5 bbl wtr ahead. Cmd w/494 sx Class "B" 65/35 poz w/3% calcium chloride, 0.25 pps Cellophane, 5 pps LCM-1, 0.5% fluid loss, 10% gel, 0.4% SMS, 2 pps Pheno-seal (1176 cu.ft.). Tailed w/63 sx class "B" 65/35 poz w/1% calcium chloride, 0.25 pps Cellophane, 0.6% fluid loss, 2 pps Pheno-seal (125 cu.ft.). Displace w/22.5 bbl wtr. Partial returns of pre-flush to surface. WOC.
8-18-01 WOC. ND BOP. NU WH. RD. Rig released.

(Verbal approval to remediate at a later date from Steve Mason, BLM and Steve Hayden, OCD).

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #6832 verified by the BLM Well Information System For BURLINGTON RESOURCES OIL & GAS, sent to the Farmington Committed to AFMSS for processing by Lucy Bee on 08/31/2001 ()	
Name (Printed/Typed) PEGGY COLE	Title REPORT AUTHORIZER
Signature	Date 08/30/2001

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
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.		
Office _____		

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.

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Animal and Wildlife Office
Y Smith