

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

1065' FSL, 1805' FEL, Sec. 11, T-30-N, R-7-W, NMPM

5. Lease Number

NM-012710

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

San Juan 30-6 Unit

8. Well Name & Number

San Juan 30-6 U #64A

9. API Well No.

30-039-25734

10. Field and Pool

Blanco MV/Basin DK

11. County and State

Rio Arriba Co, NM

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

Type of Submission

Type of Action

☐ Notice of Intent

☐ Abandonment

☐ Change of Plans

☒ Subsequent Report

☐ Recompletion

☐ New Construction

☐ Final Abandonment

☐ Plugging Back

☐ Non-Routine Fracturing

☐ Casing Repair

☐ Water Shut off

☐ Altering Casing

☐ Conversion to Injection

☒ Other - Spud

13. Describe Proposed or Completed Operations

9-16-97 MIRU. Spud well @ 1:30 p.m. 9-16-97. Drill to 237'. Circ hole clean. TOOH. TIH w/5 jts 9 5/8" 32.3# J-55 ST&C csg, set @ 232'. Cmdt w/220 sx Class "G" neat cmt w/3% calcium chloride, 0.25 pps Flocele (260 cu.ft.). Circ 16.5 bbl cmt to surface. WOC. NU BOP. PT BOP & csg to 600 psi/30 min, OK. Drilling ahead.

9-19-97 Drill to intermediate TD @ 3460'. Circ hole clean. TOOH. TIH w/83 jts 7" 20# J-55 csg, set @ 3412'.

9-20-97 Cmdt first stage w/205 sx Class "B" 50/50 poz w/1% calcium chloride, 10 pps Gilsonite, 0.5 pps Flocele, 2% gel (287 cu.ft.). Circ 3 bbl cmt to surface. Stage tool set @ 2841'. Cmdt second stage w/372 sx Class "B" 65/35 poz w/6% gel, 5 pps Gilsonite, 0.25 pps Flocele, 2% calcium chloride (729 cu.ft.). Tailed w/100 sx Class "B" neat cmt w/5 pps Gilsonite, 0.25 pps Flocele, 2% calcium chloride (115 cu.ft.). Circ 17 bbl cmt to surface. WOC. PT csg & BOP to 1500 psi/30 min, OK. Drilling ahead.

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

Signed [Signature] Title Regulatory Administrator Date 9/29/97

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

ACCEPTED FOR RECORD
Date _____

CONDITION OF APPROVAL, if any:

OCT 01 1997

FARMINGTON DISTRICT OFFICE

BY [Signature]

NMOCO