submitted in lieu of Form 3160-5

**UNITED STATES**
**DEPARTMENT OF THE INTERIOR**
**BUREAU OF LAND MANAGEMENT**

Sundry Notices and Reports on Wells

1. **Type of Well**
GAS

5. **Lease Number**
NMSF-077056

6. **If Indian, All. or Tribe Name**

7. **Unit Agreement Name**

2. **Name of Operator**
BURLINGTON RESOURCES OIL & GAS COMPANY

8. **Well Name & Number**
Cozzens C 1E

3. **Address & Phone No. of Operator**
PO Box 4289, Farmington, NM 87499 (505) 326-9700

9. **API Well No.**
30-045-23671

4. **Location of Well, Footage, Sec., T, R, M**
1520'FNL, 1110'FWL, Sec.20, T-29-N, R-11-W, NMPM

10. **Field and Pool**
Basin DK/Otero Chacra

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 | |
|---|---|---|
| _X_ Notice of Intent | ___ Abandonment | ___ Change of Plans |
| | ___ Recompletion | ___ New Construction |
| ___ Subsequent Report | ___ Plugging Back | ___ Non-Routine Fracturing |
| | ___ Casing Repair | ___ Water Shut off |
| ___ Final Abandonment | ___ Altering Casing | ___ Conversion to Injection |
| | _X_ Other - Commingle | |

13. **Describe Proposed or Completed Operations**

It is intended to commingle the subject well according to the attached procedure. A down hole commingle application will be applied for.

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

Signed Peggy Cole Title Regulatory Supervisor Date 01/28/02

FSB

(This space for Federal or State Office use)
APPROVED BY /s/ Jim Lovato Title _____ Date FEB 6 2002
CONDITION OF APPROVAL, if any:

Title 18 U.S.C. Section 1001, makes 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.

NMOCD

**Cozzens C #1E**
**Chacra / Dakota**
**1520' FNL, 1110' FWL**
**Sec. 20, T-29-N, R-11-W**
**Latitude / Longitude: 36° 42.8568' / -108° 1.1700'**
**AIN: 984901 DK / 984902 CH**
**01/02/2002 Commingle Procedure**

**Summary/Recommendation:**

Cozzens C #1E was drilled and completed as a DK/CH dual producer in 1980. Neither tubing string has been pulled since this well was originally completed. The Dakota string currently has a plunger lift system but cannot lift fluids due to a hole in the tubing. In order to optimize production it is recommended to commingle the Chacra and Dakota, install 2-3/8" tubing and plunger, and return the well to production. Neither zone has produced since July, 2001. Cumulative production has been 432 MMscf for the Chacra and 964 MMscf for the Dakota. Anticipated uplift is 100 Mcfd for the Dakota and 50 Mcfd for the Chacra.

**NOTE: ALL DEPTHS ARE MEASURED FROM KB. KB to GL was 12'.**

1. Comply with all NMOCD, BLM and Burlington safety and environmental regulations. Test rig anchors and build blow pit prior to moving in rig. **Notify BROG Regulatory (Peggy Cole 326-9727) and the appropriate Regulatory Agency prior to pumping any cement job. If an unplanned cement job is required, approval is required before the job can be pumped. If verbal approval is obtained, document approval in DIMS/WIMS. Allow as much time as possible prior to pump time in case the Agency decides to witness the cement.**

2. **Broach tubing and set tubing plug in S.N. @ 6309' in the Dakota string. To insure the tubing plug is held in place, fill tubing with half of volume with 2% KCL.** MOL and RU workover rig. Obtain and record all wellhead pressures. NU relief line. Blow well down and kill with 2% KCL water if necessary. ND WH and NU BOP with stripping head. Test and record operation of BOP rams. Have wellhead and valves serviced as necessary. (A single-tubing donut and WH for 2-3/8" tubing will be needed.) Test secondary seal and replace/install as necessary.

3. Chacra 1-1/2", 2.76#, V-55 IJ tubing is set at 2814' (gas anchor on btm; SN @2799'). Pick up 1-1/2" tubing and RIH to the top of the Model "R" packer @ 2915' to check for fill. TOOH with 1-1/2", 2.76#, V-55 Chacra tubing and LD if fill is not encountered. If fill is present, TOOH with tubing, remove gas anchor and RIH with open-ended tubing. Circulate fill off of the packer and TOOH laying down 1-1/2" tubing.

4. Dakota 1-1/2", 2.9#, J-55 EUE tubing is set at 6342' and the Baker Model "R" packer is set at 2915'. Pick straight up on DK tubing to release packer. TOOH and LD 1-1/2" tubing and packer. Visually inspect tubing for corrosion. Check tubing for scale and notify Operations Engineer and Drilling Superintendent if it is present.

5. PU 4-3/4" bit and bit sub on 2-3/8" tubing string and round trip to PBTD (6404'), cleaning out with air/mist. **NOTE: When using air/mist, minimum mist rate is 12 bph.** If scale is present, contact Operations Engineer and Drilling Superintendent to determine methodology for removing scale from casing and perforations.

6. TIH with an expendable check on bottom, seating nipple, one joint 2-3/8", 2' x 2-3/8" pup joint, then ½ of the 2-3/8" tubing. Run a broach on sandline to insure the tubing is clear. TIH with remaining 2-3/8" tubing and then broach this tubing. Replace bad joints as necessary. CO to PBTD with air/mist **using a minimum mist rate of 12 bph.** Alternate blow and flow periods at PBTD to check water and sand production rates.

7. Land tubing at approximately 6342'. ND BOP and NU single-tubing hanger WH. Pump off expendable check. Obtain final pitot gauge up the tubing. Connect to casing and circulate air to assure that the expendable check has pumped off. If well will not flow on its own, make swab run to seating nipple. **During cleanout operations the reservoir may be charged with air. As a result of excess oxygen levels that may be in the reservoir and/or wellbore, contact the Lease Operator to discuss the need for determining oxygen levels prior to returning the well to production.** RD and MOL. Return well to production.

Recommended: _____ Operations Engineer

Approved: Bruce D. Boys 1-24-02 Drilling Superintendent

Matt Roberts — Office - (599-4098) Cell - (320-2739)

~~Sundry~~ Required: (YES) NO

Approved: _____ Regulatory 1-25-02