UNITED STATES

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

		5.	
- 5 ** 12			SF-077648 If Indian, All.
Type of Well		6.	Tribe Name
GAS		12 10 10	IIIDe Name
			Unit Agreement
. Name of Operator			
BURLINGTON		IAR 2000	
DECOMPEC	& GAS COMPANY	ECENTED 13	
		LOOK BY	Well Name & Num
Address & Phone No. of Opera	tor	OCT S S	Davis #3
PO Box 4289, Farmington, NM	87499 (505) 326-9 70 0		API Well No.
		50 7 12 N DAY	30-045-11068
. Location of Well, Footage, S		10.	Field and Pool
1650'FNL, 990'FWL, Sec.1, T-	31-N, R-12-W, NMPM	4.4	Blanco Mesaverd
		11.	County and Stat San Juan Co, NM
			San Guan Co, Nu
2. CHECK APPROPRIATE BOX TO IN	DICATE NATURE OF NOTICE,	REPORT, OTHER	DATA
Type of Submission	Type of Act		
Notice of Intent	Abandonment	Change of Pla	
	Recompletion	New Construc	tion
X Subsequent Report		Non-Routine	
_, _, _, _,	Casing Repair	_ Water Shut o	
Final Abandonment		Conversion to	o Injection
	X Other - Tubing repa	air	
3. Describe Proposed or Comp	eleted Operations		
2-10-00 MIRU. ND WH. NU	POD TIH +20 UD @ 5241/	TOOU w/2 3/9	" tha TIN
	PBTD @ 5360'. SDON.	. 10011 w/2 3/6	cbg. IIII,
		. ND BOP. NU	WH. RD. Rig
2-11-00 Land 167 its 2 3	/8" 4./# U-55 TDG @ 521/		3
2-11-00 Land 167 jts 2 3 released.	/8" 4./# U-55 tbg @ 521/		
	/8" 4./# J-55 tbg @ 521/		
	/8" 4./# J-55 tbg @ 521/		
	/8" 4.7# J-55 tbg @ 5217		
	/8" 4.7# U-55 tbg @ 5217		
_	/8" 4.7# J-55 tbg @ 5217		
	/8" 4.7# U-55 tbg @ 5217		
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_	/8" 4.7# U-55 tbg @ 5217		
	/8" 4.7# U-55 tbg @ 5217		
released.		orrect.	
released.	e foregoing is true and co		
released. 4. I hereby certify that the			e 2/23/00
released. 4. I hereby certify that the igned	foregoing is true and co		TLW
released. 4. I hereby certify that the	foregoing is true and co		