

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

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|---|--|
| <p>1. Type of Well
GAS</p> <hr/> <p>2. Name of Operator
BURLINGTON
RESOURCES OIL & GAS COMPANY</p> <hr/> <p>3. Address & Phone No. of Operator
PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec., T, R, M
990' FNL, 970' FWL, Sec.12, T-31-N, R-11-W, NMPM</p> | <p>5. Lease Number
NM-079269</p> <p>6. If Indian, All. or
Tribe Name</p> <p>7. Unit Agreement Name</p>

<p>8. Well Name & Number
Lawson #1A</p> <p>9. API Well No.
30-045-22124</p> <p>10. Field and Pool
Blanco PC/MV</p> <p>11. County and State
San Juan Co, NM</p> |
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12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

- | Type of Submission | Type of Action | |
|---|---|--|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment | <input type="checkbox"/> Change of Plans |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Final Abandonment | <input type="checkbox"/> Plugging Back | <input type="checkbox"/> Non-Routine Fracturing |
| | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> Water Shut off |
| | <input type="checkbox"/> Altering Casing | <input type="checkbox"/> Conversion to Injection |
| | <input checked="" type="checkbox"/> Other - Tubing repair | |

13. Describe Proposed or Completed Operations:

- 5-15-00 MIRU. ND WH. NU BOP. Tag up @ 5275'. TOOH w/2 1/16" tbg. TIH, circ & CO to PBTD @ 5290'. SDON.
- 5-16-00 Land 162 jts 2 1/16" 3.25# J-55 tbg @ 5054'. ND BOP. NU WH. RD. Rig released.



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

Signed *Regina Cale* Title Regulatory Administrator Date 5/23/00
TLW

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date ACCEPTED FOR RECORD

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.

JUN 31 2000

NMOCB

OFFICE