

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

RECEIVED
BLM

APR 24 PM 1:17

070 FARMINGTON, NM

1. Type of Well
GAS

Lease Number
NM-0607

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

2. Name of Operator

**BURLINGTON
RESOURCES**

OIL & GAS COMPANY

APR - 8 1999

3. Address & Phone No. of Operator

PO Box 4289, Farmington, NM 87499 (505) 326-9700

4. Location of Well, Footage, Sec., T, R, M

1000' FSL, 1100' FEL, Sec. 31, T-31-N, R-10-W, NMPM

8. Well Name & Number
Atlantic C #3A

API Well No.
30-045-22800

10. Field and Pool
Blanco Mesaverde

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

<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

3-12-99 MIRU. ND WH. NU BOP. TOO H w/2 3/8" tbg. TIH w/3 7/8" bit & mill
to lnr top @ 2927'. SD for wknd.
3-15-99 Unload well. TOO H w/bit & mill. TIH w/170 jts 2 3/8" 4.7# J-55 tbg,
set @ 5210'. ND BOP. NU WH. RD. Rig released.

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

Signed [Signature] Title Regulatory Administrator Date 3/22/99 RECORD
vkh

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date APR 06 1999

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.

NMOCB

