UNITED STATES

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

	ices and Reports on Wells		
		5.	Lease Number
		_	SF-078312
. Type of Well GAS		6.	If Indian, All. or Tribe Name
		7.	Unit Agreement Name
. Name of Operator			
BURLINGTQN			
D PCATIDAR	& GAS COMPANY		
		8.	Well Name & Number
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700 4. Location of Well, Footage, Sec., T, R, M		0	Hubbard #100
		9.	API Well No. 30-045-30884
		10.	Field and Pool
735'FSL, 730'FWL, Sec.11, T-	-32-N, R-12-W, NMPM		Basin Fruitland Coa
•		11.	County and State
			San Juan Co, NM
2. CHECK APPROPRIATE BOX TO I	IDICATE NATURE OF NOTICE	REPORT, OTHER	DATA
Type of Submission	Type of Act:		
Notice of Intent	Abandonment	Change of Pla	
	Recompletion	New Construc	
X Subsequent Report		Non-Routine : Water Shut o	
Final Abandonment	Altering Casing		
	X Other -	_	3
	_ _ _		
			
3. Describe Proposed or Com	pleted Operations		
		BL-GR-CCL @ 25	62'-surface.
	auge ring to 2568'. Ran C	BL-GR-CCL @ 25	62'-surface.
2/8/02 RU W/L. TIH w/g	auge ring to 2568'. Ran C	BL-GR-CCL @ 25	62'-surface.
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2/8/02 RU W/L. TIH w/g	auge ring to 2568'. Ran C	BL-GR-CCL @ 25	62'-surface.
2/8/02 RU W/L. TIH w/g. TOC @ 570'.	auge ring to 2568'. Ran C		62'-surface.
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2/8/02 RU W/L. TIH w/g. TOC @ 570'.	auge ring to 2568'. Ran C	orrect.	ACCEPOED FOR ME SOI
2/8/02 RU W/L. TIH w/g. TOC @ 570'.	e foregoing is true and c	orrect.	ACCEPTER
2/8/02 RU W/L. TIH w/g. TOC @ 570'.	e foregoing is true and c	orrect.	ACCEPTOED FOR MESON