

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well
GAS

2. Name of Operator

BURLINGTON
RESOURCES

OIL & GAS COMPANY

3. Address & Phone No. of Operator

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

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

990' FSL, 990' FWL, Sec. 12, T-30-N, R-11-W, NMPM

M

5. Lease Number
SF-078198
If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
Nye #1

9. API Well No.
30-045-09611

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 checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input 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 -	

13. Describe Proposed or Completed Operations

It is intended to set a packer ^{below} above the Lewis formation of the subject well using the following procedure:

ND WH. NU BOP. TOOH with tubing. TIH with casing scraper to packer setting depth. TOOH. TIH with tubing and Model "R-3" packer. Land tubing at previous setting depth, set packer. ND BOP. NU WH. Return well to production.

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

Signed [Signature] (LLL5) Title Regulatory Administrator Date 5/30/97

(This space for Federal or State Office use)

APPROVED BY [Signature] Title [Signature] Date JUN 13 1997
CONDITION OF APPROVAL, if any:

NMOCD