

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

211 S
Artesia, NM

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT - " for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM 15303
2. Name of Operator BURLINGTON RESOURCES OIL & GAS COMPANY	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P. O. BOX 51810, MIDLAND, TEXAS 79710-1810 A/C 915-688-6906	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) C, 660' FNL & 1650' FWL, SEC. 9, T25S, R29E (SURFACE LOCATION) C, 560' FNL & 1500' FWL, SEC. 9, T25S, R29E (TOP OF PROD. INTERVAL) G, 1980' FNL & 1650' FEL, SEC. 9, T25S, R29E (BOTTOM HOLE LOCATION)	8. Well Name and No. CORRAL DRAW 9 #1 FEDERAL
	9. API Well No. 30-015-30201
	10. Field and Pool, or exploratory Area CORRAL DRAW WOLFCAMP GAS
	11. County or Parish, State EDDY NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR 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 Notice	<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 Ran 7" Csg.	<input type="checkbox"/> Dispose Water
		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

5-19-98 Drld 8-3/4" Hole to 10,820' MD. Ran 246 jts of 7", 26#, P-110, LTC Csg Set at 10,820'.

Cmt'd 1st state w/620 sxs "H" 50/50 POZ + 2% Gel, 3 PPS Salt, 3% HALAD-322, .25 PPS Flocele.
Tailed w/100 sxs "H" + .5% HALAD-322, .3% HALAD-344.

Opened DV Tool @7498'. Cmt'd 2nd state w/ 650 sxs interfill "H" + 5 PPS Gilsonite, .25 PPS Flocele. Tailed w/100 sxs "C" + .4% HALAD-9. Used 15 centralizers.

5-21-98 Changed out sub, made repairs to cathead. WOC 50.5 hrs. Drld out cmt to 10,810'. Ran cement bond log f/10,800'-6000', TOC @ 6300'. Test csg to 3000 psi for 10 minutes. O. K. continued drlg out cmt. Drlg ahead.

5-26-98 Drld to 11,250' MD, ran open hole logs CNL/LDT/DLL/MSFL,GR.

5-27-98 Plugged back w/150 sxs "H" cmt w/1% CFR-3, .5% D-AIR, .6% HALAD-9 & WOC. Tagged Cmt @ 10,585'.
Prep to kick-off horizontal portion of drainhole.

6-15-98 Drlg ahead on horizontal portion of hole.

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

Signed Mary L. Purz

Title REGULATORY REPRESENTATIVE

Date 6-16-98

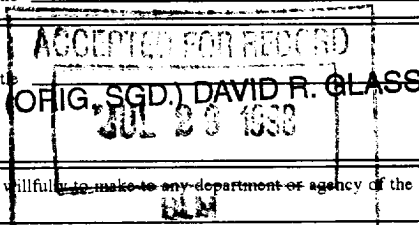
(This space for Federal or State office use)

Approved by _____

Title (HIG,SGD) DAVID R. GLASS

Date _____

Conditions 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.

* See Instruction on Reverse Side