Submitted in liew of Form 3160-5  UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT  Sundry Notices and Reports on Wells  700 APR 27 PM 3532 Lease Num NMSF-0807  If Indian Tribe Nam  Case Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700  Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700  Location of Well, Footage, Sec., T, R, M 1945'FSL, 1440'FEL, Sec.14, T30N, R6W, NMPM  11. County an Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission X Notice of Intent Recompletion Plugging Back Non-Routine Fracturing Water Shut off	13-B , All. or e ement Name
UNITED STATES  DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT  Sundry Notices and Reports on Wells  2004 APR 27 PM 3:532 Lease Num INMSF-0807  1. Type of Well GAS  070 FARMINGTON, Num Tribe Nam  7. Unit Agre  2. Name of Operator  PO Box 4289, Farmington, NM 87499 (505) 326-9700  4. Location of Well, Footage, Sec., T, R, M 1945'FSL, 1440'FEL, Sec.14, T30N, R6W, NMPM  11. County an Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission  X Notice of Intent Abandonment Recompletion Subsequent Report Plugging Back Non-Routine Fracturing	13-B , All. or e ement Name
Sundry Notices and Reports on Wells    2004 APR 27 PM 3:532   Lease Number 10	13-B , All. or e ement Name
Sundry Notices and Reports on Wells    Total APR 27 PM 3:532   Lease Num	13-B , All. or e ement Name
204 APR 27 PM 3:532 Lease Num PMSF-0807  1. Type of Well GAS  O70 FARMINGTON, 6M Tribe Nam  7. Unit Agree  2. Name of Operator  BESOURCES  OIL & GAS COMPANY  8. Well Name  3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700  4. Location of Well, Footage, Sec., T, R, M 1945' FSL, 1440' FEL, Sec.14, T30N, R6W, NMPM  10. Field and Basin Fru  11. County an Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission X Notice of Intent Abandonment X Change of Plans Recompletion Subsequent Report Plugging Back Non-Routine Fracturing	13-B , All. or e ement Name
204 APR 27 PM 3:532 Lease Num PMSF-0807  1. Type of Well GAS  O70 FARMINGTON, 6M Tribe Nam  7. Unit Agree  2. Name of Operator  BESOURCES  OIL & GAS COMPANY  8. Well Name  3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700  4. Location of Well, Footage, Sec., T, R, M 1945' FSL, 1440' FEL, Sec.14, T30N, R6W, NMPM  10. Field and Basin Fru  11. County an Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission X Notice of Intent Abandonment X Change of Plans Recompletion Subsequent Report Plugging Back Non-Routine Fracturing	13-B , All. or e ement Name
1. Type of Well GAS  O70 FARMINGTON, 6xm If Indian Tribe Nam  7. Unit Agre  2. Name of Operator OIL & GAS COMPANY  8. Well Name San Juan PO Box 4289, Farmington, NM 87499 (505) 326-9700  9. API Well 30-039-0  4. Location of Well, Footage, Sec., T, R, M 1945'FSL, 1440'FEL, Sec.14, T30N, R6W, NMPM  11. County an Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission  X Notice of Intent Abandonment Recompletion Subsequent Report Plugging Back Non-Routine Fracturing	13-B , All. or e ement Name
1. Type of Well  GAS  O70 FARMINGTON, NM Tribe Name  7. Unit Agree  2. Name of Operator  PO Box 4289, Farmington, NM 87499 (505) 326-9700  4. Location of Well, Footage, Sec., T, R, M  1945'FSL, 1440'FEL, Sec.14, T30N, R6W, NMPM  11. County an Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA  Type of Submission  X Notice of Intent  Subsequent Report  Abandonment  Recompletion  Plugging Back  Non-Routine Frac turing	, All. or e ement Name
GAS  7. Unit Agre  2. Name of Operator  BERLINGES  OIL & GAS COMPANY  8. Well Name  3. Address & Phone No. of Operator  PO Box 4289, Farmington, NM 87499 (505) 326-9700  4. Location of Well, Footage, Sec., T, R, M  1945'FSL, 1440'FEL, Sec.14, T30N, R6W, NMPM  11. County an  Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA  Type of Submission  X Notice of Intent  Abandonment  Recompletion  New Construction  New Construction  New Construction  New Construction  Plugging Back  Non-Routine Fracturing	e ement Name & Number
7. Unit Agree  2. Name of Operator  **PESOURCES**  OIL & GAS COMPANY  8. Well Name  **San Juan  PO Box 4289, Farmington, NM 87499 (505) 326-9700  9. API Well  30-039-2  4. Location of Well, Footage, Sec., T, R, M  1945'FSL, 1440'FEL, Sec.14, T30N, R6W, NMPM  11. County an  Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA  Type of Submission  X Notice of Intent  Abandonment  Abandonment  X Change of Plans  Recompletion  New Construction  Subsequent Report  Plugging Back  Non-Routine Fracturing	ement Name & Number
2. Name of Operator  **PURCLES** OIL & GAS COMPANY  8. Well Name  3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700  4. Location of Well, Footage, Sec., T, R, M 1945'FSL, 1440'FEL, Sec.14, T30N, R6W, NMPM  10. Field and Basin Fru  11. County an Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA  Type of Submission X Notice of Intent Abandonment Abandonment X Change of Plans Recompletion New Construction New Construction New Construction New Construction Non-Routine Fracturing	& Number
8. Well Name  3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700  4. Location of Well, Footage, Sec., T, R, M 1945'FSL, 1440'FEL, Sec.14, T30N, R6W, NMPM  11. County an Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission X Notice of Intent Abandonment X Change of Flans Recompletion New Construction Subsequent Report Plugging Back Non-Routine Fracturing	
RESOURCES OIL & GAS COMPANY  8. Well Name 3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700  4. Location of Well, Footage, Sec., T, R, M 10. Field and 1945'FSL, 1440'FEL, Sec.14, T30N, R6W, NMPM  11. County an Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission Type of Action X Notice of Intent Abandonment X Change of Plans Recompletion New Construction New Construction New Construction Plugging Back Non-Routine Fracturing	
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700 9. API Well 30-039- 4. Location of Well, Footage, Sec., T, R, M 1945'FSL, 1440'FEL, Sec.14, T30N, R6W, NMPM Basin Fru  11. County an Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission X Notice of Intent Abandonment X Change of Plans Recompletion New Construction Plugging Back Non-Routine Fracturing	
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700 9. API Well 30-039- 4. Location of Well, Footage, Sec., T, R, M 1945'FSL, 1440'FEL, Sec.14, T30N, R6W, NMPM Basin Fru  11. County an Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission Type of Action X Notice of Intent Abandonment Recompletion New Construction Subsequent Report Plugging Back Non-Routine Fracturing	
PO Box 4289, Farmington, NM 87499 (505) 326-9700  4. Location of Well, Footage, Sec., T, R, M 1945'FSL, 1440'FEL, Sec.14, T30N, R6W, NMPM  11. County an Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission  X Notice of Intent Abandonment X Change of Plans Recompletion New Construction New Construction New Construction Plugging Back Non-Routine Fracturing	30-6 ONTE #4472
4. Location of Well, Footage, Sec., T, R, M 10. Field and 1945'FSL, 1440'FEL, Sec.14, T30N, R6W, NMPM 11. County an Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission  X Notice of Intent Abandonment Recompletion Subsequent Report Plugging Back Non-Routine Fracturing	No.
4. Location of Well, Footage, Sec., T, R, M  1945'FSL, 1440'FEL, Sec.14, T30N, R6W, NMPM  11. County an  Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA  Type of Submission  X Notice of Intent  Abandonment  Recompletion  Subsequent Report  Plugging Back  Non-Routine Fracturing	
11. County an  Rio Arrib  12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA  Type of Submission  X Notice of Intent Abandonment Recompletion Subsequent Report Plugging Back Non-Routine Fracturing	Pool
12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA  Type of Submission  X Notice of Intent Abandonment Recompletion Subsequent Report Plugging Back Non-Routine Fracturing	itland Coal
12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA  Type of Submission  X Notice of Intent Abandonment Recompletion Subsequent Report Plugging Back Non-Routine Fracturing	d State
Type of Submission  X Notice of Intent  Recompletion  Subsequent Report  Type of Action  Abandonment  Recompletion  Plugging Back  Non-Routine Frac turing	
Casing Repair water Shut on Altering Casing Conversion to I njection Other	
13. Describe Proposed or Completed Operations The BOP configuration has been revised for the subject well according to the for attached diagram: BOP and tests:	
Surface to intermediate TD - 11" 2000 psi (minimum) double gate BOP stack (Reference Figure #1). Prior surface casing, test BOPE to 600 psi for 30 min.	to drilling out
Intermediate TD to Total Depth - 7 1/6" 2000 psi (minimum) completion BOP stack (Reference Figure #2). out intermediate casing, test BOPE and casing to 1500 psi for 30 minutes.	Prior to drilling
From surface to 7" TD – a choke manifold will be installed in accordance with Onshore Order No. 2 (Refere When the cavitation completion rig drills the production hole, the completion rig configuration will be used (#4).	nce Figure #3). Reference Figure
Pipe rams will be actuated at least once each day and blind rams actuated once each trip to test proper funupper kelly cock valve with handle and drill string safety valves to fit each drill string will be maintained and rig floor.  14. I hereby certify that the foregoing is true and correct.	ctioning. An available on the
Signed Vancey Oltmanno Title Regulatory Specialist Date 04/013/10	<b>)4</b>
(This space for Federal or State Office use)  APPROVED BY  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;	カイソノが、

BURLINGTON
RESCURCES
Figure #4
Cavitation Rig
BOP Configuration
2,000 psi Minimum System

