UNITED STATES

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

| | 16-24-361 & | | |
|---|--|--|------------------------------------|
| Sundry Notices and Repor | rts on Wells 2004-001-27 | | |
| | | $\frac{411}{5.09}$ | Lease Number |
| | RECEN | /mm | SF-080430-A |
| . Type of Well | | | If Indian, All. or |
| GAS | 070 FARMIII | Vitteri vilik | Tribe Name |
| | | 7. | Unit Agreement Name |
| 2. Name of Operator | | | San Juan 28-6 Unit |
| RESOURCES OIL & GAS COMPANY | And the second second | | |
| OIL & GAS COMPANI | All the second | 8 | Well Name & Number |
| Address & Phone No. of Operator | 75 Nov | | San Juan 28-6 Unit 213 |
| PO Box 4289, Farmington, NM 87499 (505) | 326-97.00 | <i>O04</i> 9.5 | API Well No. |
| . Location of Well, Footage, Sec., T, R, M | - 10 | 10 | 30-039-27789 Field and Pool |
| 1575'FNL,620'FEL, Sec.31, T-28-N, R-6-W, N | IMPM \ | | Blanco MV/Basin DK |
| | 1 22 | | |
| | 44.91 41 31 | | County and State Rio Arriba, NM |
| | 1000 | مُنْ اللَّهُ | ALO ALLIDA, MA |
| 2. CHECK APPROPRIATE BOX TO INDICATE NATURE | | T, OTHER | DATA |
| | Type of Action | -£ Dl | |
| Notice of Intent Abandonment Recomplet | | of Plans onstructi | on |
| X Subsequent Report Plugging | | | cacturing |
| Casing Re | epair Water | Shut of | - |
| Final Abandonment Altering X Other We | | rsion to | Injection |
| | .11 Spua | | |
| 13.Describe Proposed or Completed Operation | ons | | |
| 10/21/04 MIDII Bookgot #5 Shud 12-1/4// gr | irfaco bolo 0 2.4 | 5 on 10/ | 22/04 Dwill to |
| 10/21/04 MIRU Bearcat #5. Spud 12-1/4" su 369'. Circ hole clean. TOOH. TIH w/8 Jts 9 | 111ace noie 6 3:4 9-5/8". 32.3#. H- | 3 ON 10/2 40 Csa se | et @ 365'. Preflush |
| w/20 bbls FW. Cmt w/11 sxs Type III cmt (2 | 26 CF-5 bbl slurr | y) w/3.00 | % Cacl2, .25 pps |
| celloflake. Tail w/272 sxs Type III cmt (3 | | | |
| celloflake. Circ 25 bbls cmt to surface. F | RD. WOC. NU BOP. | PT BOP & | csg to 600 psi, OK. |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| I have been a suited that the forestion in the country and assume the | | | |
| 4. I hereby certify that the foregoing is true and correct | • | | |
| Signed Frances Dend Title | Regulatory Speci | alist Dag | ETU/25/AA DECOD |
| | | AL | CELIFRE OU HECOUP |
| This space for Federal or State Office use) APPROVED BY Title | | Date | COT 0 0 2004 |
| CONDITION OF APPROVAL, if any: | | - Lace | <u> </u> |
| itle 18 U.S.C. Section 1001, makes it a crime for any person knowingly and nited States any false, fictitious or fraudulent statements or representa | d willfully to make to any c | lepartment or | ARENIKE TON FIELD OFFICE |
| area beacon any ratio, resolutions of transactore beacommes of labrasailes | order with | | 3Y 6 48 |