

UNITED STATES 2004 NOV 18 PM 1 43  
DEPARTMENT OF THE INTERIOR RECEIVED  
BUREAU OF LAND MANAGEMENT FARMINGTON NM

## Sundry Notices and Reports on Wells

## 1. Type of Well

GAS

## 5. Lease Number:

NMSF-080724-A

## 2. Name of Operator:

BURLINGTON RESOURCES, INC.

## 6. If Indian, allottee or Tribe Name:

## 7. Unit Agreement Name:

## 2. Name and Phone No. of Operator:

P. O. Box 4289, Farmington, NM 87499  
(505) 326-9700

## 8. Well Name and Number:

ZACHRY

54

## 9. API Well No.

30045255960000

ENTERED  
AFMSS

## 4. Location of Well, Footage, Sec., T, R, U:

715' FSL &amp; 925' FWL

S:12 T:028N R:010W M

## 10. Field and Pool:

MV / BLANCO MESAVERDE (PRORATED GAS

DEC 3 2004

## 11. County and State:

San Juan

New Mexico

## 12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA:

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Non-Routine Fracturing
<input type="checkbox"/> Abandonment	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Water Shut Off
<input checked="" type="checkbox"/> Other - Re-Delivery	<input type="checkbox"/> Conversion to Injection	

## 13. Describe Proposed or Completed Operations:

This well was re-delivered after being turned off for more than 90 days on 11/5/2004 and produced an initial MCF of: 71 .

## 14. I Hereby certify that the foregoing is true and correct.

Signed

Shollie Munkres

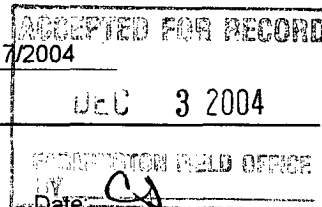
Date:

11/17/2004

(This space for Federal or State Office use.)

APPROVED BY:

Title:



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.

NMOCd