| submitted in lieu o | Form 3160-5<br>UNITED STATES<br>DEPARTMENT OF THE INTERIOR<br>BUREAU OF LAND MANAGEMENT | /                            |
|---------------------|---|------------------------------|
|                     | Sundry Notices and Reports on Wells 23 11 33  |                              |
| 1. Type of Well GAS | RECEIVED 070 FARMINGTON NM 6.   | Leas<br>NMSF<br>If I<br>Trib |

| Sunary Notices  | and Reports of 7M5 fill               | C 53 l   | am 11 33      | i           | ,                                     |
|---|---------------------------------------|----------|---------------|-------------|---------------------------------------|
|   | 1, 77                                 | RECEL    |               | 5.          | Lease Number                          |
| 1. Type of Well<br>GAS  | 070                                   | FARMIN   | GTON NM       | 6.          | If Indian, All. or<br>Tribe Name      |
| 2. Name of Operator   | · · · · · · · · · · · · · · · · · · · |          |               | 7.          | Unit Agreement Name                   |
| BURLINGTON RESCURCES OIL & GAS CO   | MDANY                                 |          |               |             |                                       |
|   | MPANI                                 |          |               | 8.          | Well Name & Number                    |
| 3. Address & Phone No. of Operator  |                                       |          |               |             | Grenier B #5M                         |
| PO Box 4289, Farmington, NM 87  | 499 (505) 326-9                       | 700      |               | 9.          |                                       |
|   |                                       |          |               |             | 30-045 <del>-33701</del> <b>332</b> 0 |
| 4. Location of Well, Footage, Sec.,   |                                       |          |               |             | Field and Pool                        |
| 1005'FSL, 1880'FWL, Sec. 6, T29N  | , R10W, NMPM                          |          | Blanc         |             | saverde/Basin Dakota                  |
|   |                                       |          |               | 11.         | County and State San Juan Co, NM      |
| 12 CUECK ADDRODDIAME DOW MO THOUGH  | MD 113 MITTOD OF 110                  |          |               |             |                                       |
| 12. CHECK APPROPRIATE BOX TO INDICA<br>Type of Submission   |                                       | of Actio |               | THER        | DATA                                  |
| <del></del>   | Abandonment                           |          | n<br>hange of | Dlar        | n e                                   |
|   | _ Recompletion                        | —        | New Cons      |             |                                       |
| Subsequent Report   | Plugging Back                         |          |               |             |                                       |
|   | Casing Repair                         |          | Water Sh      | ut of       | racturing<br>f                        |
| Final Abandonment X   | Altering Casi<br>Change of Cas        | ng       | Conversi      | on to       | Injection                             |
| 13.Describe Proposed or Completed O   | perations                             |          |               | <del></del> |                                       |
| Due to geologists wanting to to change the depth of this w casing and run 4 ½" casing to with two stages of cement. | ell from 6758'                        | to 7003  | ' and to      | elim        | inate 7" intermediate                 |
| Verbal approval from Adrienne Br<br>centralizers every fourth joint<br>then standard centralizers every             | from TD to base                       | of Ojo   | Alamo @       | 1018        | ', two turbolizers.                   |
| 14. I hereby certify that the for   | egoing is true                        | and cor  | rect.         |             |                                       |
| Signed ( Du Clark   | Title Cr D                            | 001111   | m. Coosi      | . 1         | D-+- 0/02/05                          |

Title <u>Sr. Regulatory Specialist</u> Date <u>8/23/05</u> (This space APPROVED BY State Office use) 8/25/05 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.



NMOCD