

Submitted in lieu of Form 3160-5 (June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.

RECEIVED

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

OCT 23 2013

Farmington Field Office
Bureau of Land Management

1. Type of Well:

Gas

2. Name of Operator:

BURLINGTON RESOURCES OIL & GAS COMPANY LP

3. Address and Phone No. of Operator:

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

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

FOOTAGE: 490' FNL & 585' FEL
S: 06 T: 27N R: 06W U: A

5. Lease Number:

SF-079051

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name:

8. Well Name and Number:

SAN JUAN 28-6 UNIT 186N

9. API Well No.

3003929329

10. Field and Pool:

DK - BASIN::DAKOTA
MV - BLANCO::MESAVERDE

11. County and State:

RIO ARRIBA, NM

RCVD NOV 12 '13
OIL CONS. DIV.
DIST. 3

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

<input type="checkbox"/>	Notice of Intent	<input type="checkbox"/>	Recompletion	<input type="checkbox"/>	Change of Plans
<input checked="" 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 on 10/15/2013 and produced natural gas and entrained hydrocarbons.

Notes: RE-DELIVERY SHUT IN FOR MORE THAN 90 DAYS DUE TO GETTING NEW OIL TANK

TP: 144 CP: 266 Initial MCF: 488

Meter No.: 85832

Gas Co.: ENT

Proj Type.: REDELIVERY

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

Signed: Denise Journey
Denise Journey

Title: Staff Regulatory Tech.

Date: 10/17/2013

(This Space for Federal or State Office Use)

APPROVED BY: _____ Title: _____

ACCEPTED FOR RECORD

Date: NOV - 7 2013

FARMINGTON FIELD OFFICE
BY: CMA

CONDITION OF APPROVAL, if any: _____

NMOCD
ca