Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR

FORM APPROVED OMB No. 1004-0137

BUREAU OF LAND MANAGEMENT NOV 22 2013			Expires: July 31, 2010	
	NOA SS	201:5	. Lease Serial No.	M-013706
SUNDRY NOTICES AND REP	ORTS ONWELLSon Fi	ield 0		
Do not use this form for proposals abandoned well. Use Form 3160-3 (A	to drill(or-to_re-enter-arg	nanara	27.3., 	
SUBMIT IN TRIPLICATE - Other instructions on page 2.			7. If Unit of CA/Agreement, Name and/or No.	
1. Type of Well			San Juan 30-6 Unit	
Oil Well X Gas Well Other		8.	8. Well Name and No. San Juan 30-6 Unit Com 467	
2. Name of Operator Burlington Resources Oil & Gas Company LP			9. API Well No. 30-039-24475	
3a. Address	3b. Phone No. (include area cod	· .	10. Field and Pool or Exploratory Area	
PO Box 4289, Farmington, NM 87499	(505) 326-9700		Basin Fruitland Coal	
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description) Surface Unit M (SWSW), 1240' FSL & 1105' FWL, Sec. 22, T30N, R7W			1. Country or Parish, State Rio Arriba	, New Mexico
12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE C	OF NOTI	CE, REPORT OR OTH	ER DATA
TYPE OF SUBMISSION	TYPE C	OF ACTI	ION	
X Notice of Intent	Deepen Fracture Treat	Rec	duction (Start/Resume) lamation	Water Shut-Off Well Integrity
Subsequent Report Casing Repair	New Construction	=	omplete	X Other TA Status
Final Abandonment Notice Convert to Injection	Plug and Abandon Plug Back	===	nporaríly Abandon ter Disposal	Extension
Attach the bond under which the work will be performed or provide the following completion of the involved operations. If the operation results Testing has been completed. Final Abandonment Notices must be filed determined that the site is ready for final inspection.) The subject well was TA'd on 3/12/13. Burlington status to review for future uphole potential.	in a multiple completion or recomonly after all requirements, including the control of the contr	mpletion in ling reclama	a new interval, a Form 3160- ation, have been completed an sion to extend the te	4 must be filed once dd the operator has
14. I hereby certify that the foregoing is true and correct. Name (Printed/Typ	ed)			
Dollie L. Busse	Title Staff Re	egulator	y Technician	
Signature Milli & Busse	Date Ji/	121/	13	
THIS SPACE FOR FEDERAL OR STATE OFFICE USE				
Approved by Original Signed: Stephen Masor	Title	le		NOV 2/5 2013
Conditions of approval, if any, are attached. Approval of this notice does not that the applicant holds legal or equitable title to those rights in the subject lea	- 1	fice		

entitle the applicant to conduct operations thereon.

false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any