

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.

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

RECEIVED  
FEB 01 2016  
Farmington Field Office  
Bureau of Land Management

1. Type of Well:

Gas

5. Lease Number:

SF-080781

2. Name of Operator:

BURLINGTON RESOURCES OIL & GAS COMPANY LP

6. If Indian, allottee or Tribe Name:

3. Address and Phone No. of Operator:

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

7. Unit Agreement Name:

8. Well Name and Number:

CAIN 19

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

FOOTAGE: 810' FNL & 1460' FEL

S: 16 T: 028N R: 010W U: B

9. API Well No.

3004520528

10. Field and Pool:

PC - FULCHER-KUTZ::PICTURED CLIFFS

11. County and State:

SAN JUAN, NM

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 1/11/2016 and produced natural gas and entrained hydrocarbons.

Notes: REDELIVERED / WELL SHUT IN FOR MORE THAN 90 DAYS / RETURNED TO PRODUCTION

TP: 70 CP: 70 Initial MCF: 65

Meter No.: 32904

Gas Co.: WFC

Proj Type.: REDELIVERY

OIL CONS. DIV DIST. 3  
FEB 10 2016

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

Signed Dollie Busse  
Dollie Busse

Title: Staff Regulatory Tech.

Date: 1/26/2016

ACCEPTED FOR RECORD

(This Space for Federal or State Office Use)

APPROVED BY: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

FEB 02 2016

FARMINGTON FIELD OFFICE  
BY: [Signature]

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.

NMOCD

20