

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

MAR 18 2016

Farmington Field Office
Bureau of Land Management

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

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: 1657' FSL & 1600' FEL
S: 31 T: 026N R: 009W U: J

5. Lease Number:

SF-078518-A

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name:

8. Well Name and Number:

HUERFANO UNIT 137

9. API Well No.

3004513030

10. Field and Pool:

DK - BASIN::DAKOTA

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 3/14/2016 and produced natural gas and entrained hydrocarbons.

Notes: WELL SHUT-IN FOR MORE THAN 90 DAYS DUE TO SEPARATOR ISSUE

OIL CONS. DIV DIST. 3

MAR 28 2016

TP: 230 CP: 230 Initial MCF: 151

Meter No.: 73465

Gas Co.: ENT

Proj Type.: REDELIVERY

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

Signed [Signature] Title: Staff Regulatory Tech. Date: 3/18/2016

ACCEPTED FOR RECORD

(This Space for Federal or State Office Use)

APPROVED BY: _____ Title: _____ Date: MAR 21 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

XC