

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

2006 MAY 30 PM 2 02

1. Type of Well
GAS

2. Name of Operator
BURLINGTON
RESOURCES OIL & GAS COMPANY

3. Address & Phone No. of Operator
PO Box 4289, Farmington, NM 87499 (505) 326-9700

4. Location of Well, Footage, Sec., T, R, M
370' FSL, 20' FEL, Sec. 34, T27N, R4W, NMPM surface
700' FSL, 704' FEL, Sec. 34, T27N, R4W, NMPM bottom

5. Lease Number
NMSF-079607

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name
San Juan 27-4 Unit

8. Well Name & Number
San Juan 27-4 Unit Com 34N

9. API Well No.
30-039-26903

10. Field and Pool
Basin Dakota

11. County and State
Rio Arriba Co, NM

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

Type of Submission

Type of Action

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other - Casing & Cementing	

13. Describe Proposed or Completed Operations

5/22/06 RU blooie line, XO Kelly; replace both load bearing pins. Stage in hole w/3 1/2 DP, tag DV tool @ 3447'. PT rams to 1500 psi/30 min, OK.
5/23/06 Drill out cmt & float collar. TOOH w/bad bit. TIH w/new bit. Drilling 6 1/2" hole ahead.
5/26/06 Drill to TD @ 8318'. TIH w/198 jts 4 1/2" 11.6# L-80 LT&C csg set @ 8317'. Circ hole clean.
5/27/06 Cmt w/9 sxs Premium Lite cmt w/.25 pps celloflake, .3% CD-32, 6.25 pps LCM-1, 1% fluid loss (27 cu ft). Lead w/313 sxs Premium Lite cmt w/.24 pps celloflake, .3% CD-32, 6.25 pps LCM-1, 1% fluid loss (6200 cu ft). Displace w/129 bbls wtr.
ND BOP. NU WH. RD. Rig released.

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

Signed Joni Clark Title Regulatory Analyst Date 5/22/06

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

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

ACCEPTED FOR RECORD

JUN 05 2006

FARMINGTON FIELD OFFICE