

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

Sundry Notices and Reports on Wells

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| <p>1. Type of Well GAS</p> <p>2. Name of Operator BURLINGTON RESOURCES OIL & GAS COMPANY LP</p> <p>3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <p>4. Location of Well, Footage, Sec., T, R, M Sec., T--N, R--W, NMPM</p> <p>Unit J (NWSE) 1515' FSL & 1585' FEL, Sec. 20 T28N R6W NMPM Surface Unit I (NESE) 2274' FSL & 95' FEL, Sec. 20 T28N R6W NMPM Bottom</p> | <p>5. Lease Number NMSF-079193</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name San Juan 28-6 Unit</p> <p>8. Well Name & Number San Juan 28-6 Unit #127M</p> <p>9. API Well No. 30-039-27815</p> <p>10. Field and Pool Blanco Mesaverde</p> <p style="text-align: right;">Rio Arriba Co., CO</p> |
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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 | <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 |

☒ Other – Log and PT 7" csg

13. Describe Proposed or Completed Operations

6/9/06 MIRU Aztec #449. Kill well w/10bbls H2O. ND tree. NU BOP. Pull hanger. POOH w/tbg. RU WL RIH and set 4 ½" bridge plug @ 7730'. POOH. RD WL. Load hole w/ H2O. PT to 1000psi, test good.

6/13/06 ND BOP. NU Frac valve and frac. PT csg and frac to 4100psi for 15mins, ok.

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

Signed Amanda Sanchez Amanda Sanchez Title Regulatory Analyst Date 7/31/06

(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 any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

