

submitted in lieu of Form 3160-5

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well  
GAS

2. Name of Operator  
**BURLINGTON**  
RESOURCES OIL & GAS COMPANY LP

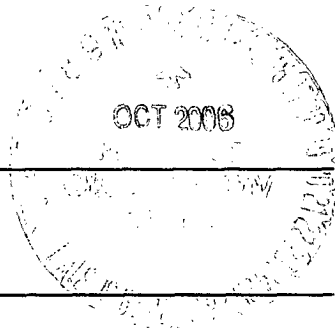
3. Address & Phone No. of Operator  
PO Box 4289, Farmington, NM 87499 (505) 326-9700

4. Location of Well, Footage, Sec., T, R, M

Unit D (NWNW), 1120' FNL & 720' FWL, Section 17, T29N, R8W, NMPM

2006 OCT 6 PM 2 28

RECEIVED  
070 FARMINGTON NM



5. Lease Number  
NMSF-078414-A  
6. If Indian, All. or  
Tribe Name  
7. Unit Agreement Name

8. Well Name & Number  
Lively #10M  
9. API Well No.  
30-045-33180

10. Field and Pool  
Blanco Mesaverde / Basin DK  
11. County and State  
San Juan Co., NM

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

Type of Submission	Type of Action
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment <input type="checkbox"/> Change of Plans <input checked="" type="checkbox"/> Other - Extend APD
<input 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

13. Describe Proposed or Completed Operations

Burlington wishes to extend the APD approval for this year for another year. Plans still are to drill this well.

THIS APPROVAL EXPIRES 10/22/07

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

Signed Patsy Clugston Title Sr. Regulatory Specialist Date 10/5/06

(This space for Federal or State Office use)

APPROVED BY Original Signed: Stephen Mason Title \_\_\_\_\_ Date OCT 12 2006

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.

NMOCD  
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