UNITED STATES

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

BURLINGTON RESCURCES OIL & GAS COMPANY LP 8. Well Name & Number 3. Address & Phone No. of Operator		Sundry Notices and Reports on Wells				
2. Name of Operator BURLINGTON RESCURCES 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 Sec., T-N, R-W, NMPM 10. Field and Pool Unit M (SWSW) 590' FSL & 375' FWL, Sec. 9, T29N, R07W NMPM 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 New Construction X Subsequent Report Plagging Non-Routine Fracturing RCUD FEB7'07 Plagging Non-Routine Fracturing Casing Repair Water Shut off DIL CONS. DIU. 13. Describe Proposed or Completed Operations 11/22/06 Run CBL/GR/CCL from PBTD to surface. TOC @ 370'. 12/14/06 RU BWWL. RIH w/3.75" Gauge ring. Tagged @ 3668'. PBTD @ 3723'. Ran GR/CCL Log from 3668' to surface. PT 4 ½" casing to 4100 #. Test OK. 14. I hereby certify that the foregoing is true and correct. Signed Mey North Proposed or Federal or State Office use) APPROVED BY Title Date Date CONDITION OF APPROVAL, if any:	_				5.	
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BURLINGTON RESCURCES OIL & GAS COMPANY LP 8. Well Name & Number 8. Well Name & Number San Juan 29-7 Unit #549S San Juan 29-7 Unit #549S San Juan 29-7 Unit #549S API Well No. 30-039-29744 4. Location of Well, Footage, Sec., T, R, M Sec., TN, RW, NMPM 10. Field and Pool Unit M (SWSW) 590' FSL & 375' FWL, Sec. 9, T29N, R07W NMPM 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 Notice of Intent Abandonment Abandonment Recompletion New Construction New Construction RCUD FEB7'07 DIL CONS. DIV. 13. Describe Proposed or Completed Operations DIST. 3 11/22/06 Run CBL/GR/CCL from PBTD to surface. TOC @ 370'. 12/14/06 RU BWWL. RIH w/3.75" Gauge ring. Tagged @ 3668'. PBTD @ 3723'. Ran GR/CCL Log from 3668' to surface. PT 4 ½" casing to 4100 #. Test OK. 14. I hereby certify that the foregoing is true and correct. Signed May May May Take Tracey N, Monroe Title Regulatory Technician Date 1/22/07 This space for Federal or State Office use) APPROVED BY Title Date Date Date	2	Name of Operator			7.	Unit Agreement Name
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CONDITION OF APPROVAL, if any:						Dete
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