UNITEDSTATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

FORMAPPROVED OM B No. 1004-0137 Expires: March 31, 2007

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| NMS | F0 | 78 | 71 | 6A |
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6 If Indian Allottee or Tribe Name

| | is form for proposals to II. Use Form 3160-3 (A | | oposals. | O. II literally, Allottee of Tribe Name |
|--|---|--|--|---|
| SUBMIT IN TRI | PLICATE - Other instru | ıctions on reve | | 7. If Unit or CA Agreement, Name and/or No. |
| 1. Type of Well Oil Well | A to the | 8 Well Name and No. | | |
| 2. Name of Operator | • • | | GLU PROG | SAN JACINTO 6N |
| Burlington Resources Oil | & Gas | <u> </u> | | 9. API Well No. |
| 3a. Address PO BOX 4289 Farmingto | n NM 87401 | 3b. PhoneNo. (inclu (505)326-9 | · · | 30-045-33920 10. Field and Pool, or Exploratory Area |
| 4. Location of Well (Footage, Sec | ., T., R., M., or Survey Descrip | tion) | | Blanco Mesaverde/ Basin Dakota |
| 1342 NORTH 1824 WES UL: F, Sec: 20, T: 29N, R | | | | 11. County or Parish, State SAN JUAN NM |
| 12. CHECK AF | PROPRIATE BOX(ES)TO | INDICATE NATU | IRE OF NOTICE, R | EPORT, OR OTHER DATA |
| TYPE OF SUBMISSION | | T | PEOF ACTION | |
| Notice of Intent Subsequent Report Final Abandonment Notice | Acidize AlterCasing Casing Repair Change Plans Convert to Injection | Deepen FractureTreat New Construction Plug and Abandor Plug Back | = | Well Integrity X OtherSpud andon Report |
| testing has been completed. Fir determined that the site is read: 02/16/07 MIRU H&P #2 | nal Abandonment Notices shall be of for final inspection.) 83. Spud well on 02/17 I set @ 243'. TOH RU to g and displace w/16 bbl | filed only after all requ /07 @ 1630 HR: o cement. Pum | irements, including reclans S. Drill 13 1/2" hole 244 sx (309 cf - | RCVD FEB23'07 |
| APD / ROW | | | | OIL CONS. DIV. |
| ALD / NOW | | | | DIST. 3 |
| | | · | | |
| I hereby certify that the fore Name (Printed/Typed) | going is true and correct | ı | | |
| Juanita Farrell | | Title | Regulatory Spe | cialist |
| Signature Haut | Faire 0 | Date | | |
| | THIS SPACE FOR I | EDERAL OR | STATE OFFICE | USE |
| Approved by Conditions of approval, if any, are certify that the applicant holds legs which would entitle the applicant Title 18 U.S.C. Section 1001 and Title 18 U | or equitable title to those rights to conduct operations thereon. | in the subject lease | Title Office | Date Date to make to any department or agency of the United |
| States any false, fictitious or fraud | lulent statements or representati | ons as to any matter v | vithin its jurisdiction. | EEQ 2.7 2007 |

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