Submitted in lieu of Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

RECEIVER

FORM APPROVED

AUG 1 5 2008

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT" - for such proposals.

Budget Bureau No. 1004-0135 Famington Field Office Expires: March 31, 1993

> RCVD AUG 19 '08 OTI CONS. DTV.

1	,			
1. Type of Well:		5. Lease Number:	DIST. 3	
Gas		NMSF-078138		
2. Name of Operator:		6. If Indian, allottee or Tribe Name:		
BURLINGTON RESOURCES OIL &	GAS COMPANY LP			
3. Address and Phone No. of Operator:		7. Unit Agreement Name		
P. O. Box 4289, Farmington, NM 874	499	0 Mail Manager and Manager		
(505) 326-9700		8. Well Name and Number BRUINGTON 1F	•	
4. Location of Well, Footage, Sec. T, R, U:		BRUINGTON IF	•	
FOOTAGE: 1520 FSL & 1120 FEL		9. API Well No.		
S: 20 T: 030N R: 011W U: I		3004524141		
		10. Field and Pool:		
		PC - BALLARD::PIC	TURED CLIFFS	
		11. County and State:		
		SAN JUAN, NM		
12. CHECK APPROPRIATE BOX TO INDICA	TE NATURE OF NOTICE, REPORT,	OTHER DATA		
Notice of Intent	Recompletion	Change of Pla	Change of Plans	
X Subsequent Report	Plugging Back	New Construction		
Final Abandonment Casing Repair		Non-Routine Fracturing		
Abandonment	Altering Casing	Water Shut O	ff	
·	X Other- Re-Delivery	Conversion to	Injection	
13. Describe Proposed or Completed Opera	tions			
This well was re-delivered on 6/18/2008		ned hydrocarbons		
	-	ned nydrocarbons.	ACCEPTED FOR DECOM	
TP: N/A CP: 11	2 Initial MCF: 150		ACCEPTED FOR RECOR	
Meter No.: 93565			AUG 15 2008	
Gas Co.: EFS			FARMINGTON FIELD OFFICE	
	M		BY	
14. I Hereby centify that the foregoing is true	and/correct.			
MILLIAN TANCO	11/2			
Signed \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Title: Regulatory Tec	ch. Date: 8/14	./2008	
MaYie E. Jaramillo				
This Space for Federal or State Office Use)				
APPROVED BY:	Title:	Date:		
CONDITION OF APPROVAL, if any:				
CONDITION OF ALTROPAL, II dily.				