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

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.

1. Type of Well:

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Gas

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

3. Address and Phone No. of Operator:

P. O. Box 4289, Farmington, NM 87499

(505) 326-9700

4. Location of Well, Footage, Sec. T, R, U: FOOTAGE: 1600' FSL & 1815' FWL S: 22 T: 027N R: 005W U: K FORM APPROVED - المصندن م Budget Bureau No. 1004-0135 Expires: March 31, 1993

NOV 19 2008

Europu of Lond Managemont on Field Office

5. Lease Number: SF-079403

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name:

8. Well Name and Number: SAN JUAN 27-5 UNIT 118

9. API Well No.

3003920318

10. Field and Pool:

DK - BASIN::DAKOTA

MV - BLANCO::MESAVERDE

11. County and State:

RIO ARRIBA, NM

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

	Notice of Intent		Recompletion	Change of Plans
X	Subsequent Report		Plugging Back	 New Construction
	Final Abandonment		Casing Repair	 Non-Routine Fracturing
	Abandonment		Altering Casing	 Water Shut Off
a particular de la constance de		X	Other- Re-Delivery	 Conversion to Injection

13. Describe Proposed or Completed Operations

This well was re-delivered on 11/10/2008 and produced natural gas and entrained hydrocarbons.

	TP: 500	CP: 500	Initial MCF: 10041	· • -		
• •	Meter No.:	87178			RCVD DEC 1 '08 DIL CONS. DIV	
а 4 с 4 с 4 с 4 с 4 с 4 с 4 с 4 с 4 с 4 с	Gas Co.:	WFS			DIST. 3	
f - <u></u>	Proj Type.:					
14. I Hereby	certify that th	e foregoing is true and cor	rect.			
Signed		12 RHamile	Title: Regulatory Tech.	Date: 11/	/19/2008	
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(This Space for F	ederal or State	Office Use)			ACCEPTED FOR RECORD	
APPROVED) BY:		Title:	Date:	NOV 2 5 2008	
CONDITION OF APPROVAL, if any:					FARMINGTON EFELD OFFICE	
Title 18 U.S.	.C. Section 100	1, makes it a crime for any p	erson knowingly and willfully to make	to any departmer	nt or agency of the	

United States any false, fictitious or fraudulent statements.

NMOCD