

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

Sundry Notices and Reports on Wells

RECEIVED

JAN 27 2009

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

kl Surf: Unit I (NESE), 2345' FSL & 915' FEL, Section 8, T27N, R6W, NMPM

5. Lease Number
USA-NM-03583
6. If Indian, All. or
Tribe Name

7. Unit Agreement Name
San Juan 28-6 Unit

8. Well Name & Number
San Juan 28-6 Unit 204N

9. API Well No.
30-039-30568

10. Field and Pool
Basin DK/Blanco MV

11. County and State
Rio Arriba, NM

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

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

RCVD FEB 2 '09
OIL CONS. DIV.
DIST. 3

13. Describe Proposed or Completed Operations

01/20/2009 MIRU AWS. Spud w/12 1/4" bit @ 1930hrs on 01/20/2009. Drilled ahead to 240'. Circ hole. RIH w/ 5 jnts, 9 5/8" csg, 32.3#, H-40, ST&C & set @ 232'. Pre-flush w/ 20bbls of H2O. Pumped 162sx (207cf-37bbl) Type III cmt w/3% Bowz, 25 pps Cello Flake, 52% FW. Drop & displace plug w/16 bbl H2O circ 19 bbl cmt to surface @ 0834hrs on 01/21/2009. WOC. 01/22/2009 @ 0600hrs - PT csg @ 600#/30 min. - Good PT. ✓
APD/ROW ✓

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

Signed Jamie Goodwin Title Regulatory Technician Date 01/26/09

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

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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