

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

SUNDRY NOTICES AND REPORTS ON WELLS

FORM APPROVED

Budget Bureau No. 1004-0135 JUL 27 2009

Expires: March 31, 1993

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

Bureau of Land Management
Farmington Field Office

Use "APPLICATION FOR PERMIT" - for such proposals.

1. Type of Well:

Gas

5. Lease Number:

SF-080425A

2. Name of Operator:

BURLINGTON RESOURCES OIL & GAS COMPANY LP

6. If Indian, allottee or Tribe Name:

3. Address and Phone No. of Operator:

P. O. Box 4289, Farmington, NM 87499
(505) 326-9700

7. Unit Agreement Name:

8. Well Name and Number:

HUERFANO UNIT 259

4. Location of Well, Footage, Sec. T, R, U:

FOOTAGE: 1180' FNL & 1500' FWL
S: 06 T: 026N R: 010W U: C

9. API Well No.

3004521411

10. Field and Pool:

FRC - BASIN CB::FRUITLAND COAL

11. County and State:

SAN JUAN, NM

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

| | | | | | |
|-------------------------------------|-------------------|-------------------------------------|--------------------|--------------------------|-------------------------|
| <input type="checkbox"/> | Notice of Intent | <input type="checkbox"/> | Recompletion | <input type="checkbox"/> | Change of Plans |
| <input checked="" type="checkbox"/> | Subsequent Report | <input type="checkbox"/> | Plugging Back | <input type="checkbox"/> | New Construction |
| <input type="checkbox"/> | Final Abandonment | <input type="checkbox"/> | Casing Repair | <input type="checkbox"/> | Non-Routine Fracturing |
| <input type="checkbox"/> | Abandonment | <input type="checkbox"/> | Altering Casing | <input type="checkbox"/> | Water Shut Off |
| | | <input checked="" type="checkbox"/> | Other- Re-Delivery | <input type="checkbox"/> | Conversion to Injection |

13. Describe Proposed or Completed Operations

This well was re-delivered on 5/21/2009 and produced natural gas and entrained hydrocarbons.

Notes: THIS WELL WAS SHUT IN FOR MORE THAN 90 DAYS DUE TO COMPRESSOR REPAIR.

TP: 26 CP: 28 Initial MCF: 33

RCVD JUL 29 '09
OIL CONS. DIV.
DIST. 3

Meter No.: 97738

Gas Co.: EFS

Proj Type.: REDELIVERY

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

Signed

Mary E. Jaramila
Mary E. Jaramila

Title: Regulatory Tech.

Date: 7/24/2009

(This Space for Federal or State Office Use)

ACCEPTED FOR RECORD

APPROVED BY:

Title:

Date:

JUL 27 2009

CONDITION OF APPROVAL, if any:

FARMINGTON FIELD OFFICE
BY *[Signature]*

REC'D