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

RECEIVED

FORM APPROVED

Budget Bureau No. 1004-0135

NOV 0 6 2009

Expires: March 31, 1993

Bureau of Land Moneyement Farmington Field Office

1. Type of Well:	5	. Lease Number:
Gas		NMNM03561
2. Name of Operator:	6	i. If Indian, allottee or Tribe Name:
BURLINGTON RESOURCES OIL & GAS COM		. Unit Agreement Name:
3. Address and Phone No. of Operator:	,	. Offic Agreement Name.
P. O. Box 4289, Farmington, NM 87499	8	. Well Name and Number:
(505) 326-9700		GRENIER B 2
4. Location of Well, Footage, Sec. T, R, U:	9	. API Well No.
FOOTAGE: 1650' FSL & 1650' FEL		3004508696
S: 06 T: 029N R: 010W U: J	1	0. Field and Pool:
		PC - BALLARD::PICTURED CLIFFS
,	1	1. County and State:
		SAN JUAN, NM
12. CHECK APPROPRIATE BOX TO INDICATE NATUR	RE OF NOTICE, REPORT, O	THER DATA
Notice of Intent R	Recompletion	Change of Plans
and the last time	Plugging Back	New Construction
Final Abandonment C	Casing Repair	Non-Routine Fracturing
Abandonment , A	Altering Casing	Water Shut Off
х	Other- Re-Delivery	Conversion to Injection
13. Describe Proposed or Completed Operations	and a supplemental and a supplem	
This well was re-delivered on 10/23/2009 and produ	uced natural gas and entraine	ed hydrocarbons.
Notes: WELL SHUT IN MORE THAN 90 DAYS	S DUE TO DUMP LINE REPA	AIR.
,		RCVD NOV 20 '09
TP : N/A CP : 97	Initial MCF: 58	OIL COMS. DIV.
Meter No.: 70541		DIST. 3
		_
Gas Co.: EFS		
Proj Type.: REDELIVERY	,	
14. I Hereby certify that the foregoing is true and corre	ect.	
- MACINDE TO COLLAR	-	D 4 4414/0000
Signed	Title: Regulatory Tech.	Date: 11/4/2009
		ACCEPTED FOR RECORD
is Space for Federal or State Office Use)		
is Space for Federal or State Office Use) APPROVED BY:	Title:	Date: NOV 1 7 2009
APPROVED BY: CONDITION OF APPROVAL, if any:	Title:	Date: NOV 1 7 2009 FARMING TO DEFICE