

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

RECEIVED

JAN 24 2011

Sundry Notices and Reports on Wells

Farmington Field Office
Bureau of Land Management

1. Type of Well
GAS

5. Lease Number
NM-020495
6. If Indian, All. or
Tribe Name
Navajo Nation
7. Unit Agreement Name

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

8. Well Name & Number
Angle Peak 1F

9. API Well No.

30-045-34622

4. Location of Well, Footage, Sec., T, R, M

Surface: Unit J (NWSE), 1740' FSL & 2425' FEL, Section 2, T27N, R11W, NMPM

10. Field and Pool
Basin Dakota

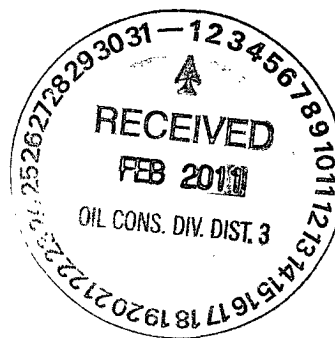
11. County and State
San Juan, NM

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

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

13. Describe Proposed or Completed Operations

Burlington Resources request an extension to the APD for the subject well.



This approval expires 1-29-13

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

Signed Brandie Blakley Brandie Blakley

Title Staff Regulatory Technician Date 1/18/11

(This space for Federal or State Office use)

APPROVED BY Cynthia Marquez Title LLE

Date 1-27-11

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