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.

RECEVED

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

FEB 01 2011

Farmington Field Office Bureau of Land Management

1. Type of Well:		5. Lease Number:
Gas		SF-078741
2. Name of Operator:		6. If Indian, allottee or Tribe Name:
BURLINGTON RESOURCES OIL & GA	S COMPANY LP	
2 Address and Phone No. of Operator:		7. Unit Agreement Name:
3. Address and Phone No. of Operator:		O Mall Name and Number
P. O. Box 4289, Farmington, NM 87499 (505) 326-9700		8. Well Name and Number:
(303) 320-3700	<del></del>	SAN JUAN 30-6 UNIT 3A
4. Location of Well, Footage, Sec. T, R, U:		9. API Well No.
FOOTAGE: 1170' FNL & 890' FWL		3003925805
S: 24 T: 030N R: 006W U	: D	10. Field and Pool:
		DK - BASIN::DAKOTA
		MV - BLANCO::MESAVERDE
		11. County and State:
		RIO ARRIBA, NM
	erythe filming i thegame, as for a little desires, as eastern from the constraint of	
12. CHECK APPROPRIATE BOX TO INDICATE	NATURE OF NOTICE, REPO	PRT, 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
	X Other- Re-Delivery	Conversion to Injection
TP: 472 CP: 600  Meter No.: 82474  Gas Co.: WFC  Proj Type.: REDELIVERY	I produced natural gas and er RE THAN 90 DAYS DUE TO Initial MCF: 1	NEW DRILL SAN JUAN 30-6 UNIT 3M  RECEIVED  RES 2011  RES
14. I Hereby certify that the foregoing is true an	d correct.	60 / Company 60 /
Signed James Sessions	Title: Staff Regui	atory Tech. Date: 1/31/2011
This Space for Federal or State Office Use)		ACCEPTED FOR RECORD
APPROVED BY:	Title:	Date: FEB 0 3 2011
	<del>alada distribus anti sall'indikumi denora melautini indipuncia dipugan apara au dipunyan uninggapay uninggapay yan</del> !	FARMINGTON FELD OFFICE
CONDITION OF APPROVAL, if any:	NMOCD	

