Submitted in lieu of Form 3160-5 (June 1990) **UNITED STATES** DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT** FORM APPROVED SUNDRY NOTICES AND REPORTS ON WELLS Budget Bureau No. 1004-0135 Expires: March 31, 1993 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. 1. Type of Well: 5. Lease Number: E-289-52 Gas 2. Name of Operator: 6. If Indian, allottee or Tribe Name: BURLINGTON RESOURCES OIL & GAS COMPANY LP 7. Unit Agreement Name: 3. Address and Phone No. of Operator: P. O. Box 4289, Farmington, NM 87499 8. Well Name and Number: (505) 326-9700 SAN JUAN 30-6 UNIT 86B 4. Location of Well, Footage, Sec. T, R, U: 9. API Well No. FOOTAGE: 277' FSL & 1268' FEL 3003930870 **S**: 36 T: 030N R: 007W U: P 10. Field and Pool: DK - BASIN::DAKOTA MV - BLANCO::MESAVERDE 11. County and State: RIO ARRIBA, NM 12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Notice of Intent Recompletion Change of Plans Subsequent Report Plugging Back **New Construction** Non-Routine Fracturing Final Abandonment Casing Repair Water Shut Off Abandonment Altering Casing Other-First Delivery Conversion to Injection 13. Describe Proposed or Completed Operations This well was first delivered on 1/24/2011 and produced natural gas and entrained hydrocarbons. THIS WELL WAS DELIVERED THROUGH GAS RECOVERY COMPLETION. STARTED SELLING ON THE MV 01/24/11, MV & DK FLOWING TOGETHER ON 01/26/11. FINISHED THE GAS RECOVERY COMPLETION 02/02/11 TP: CP: Initial MCF: 11990 Meter No.: 88511 Gas Co.: WFC Proj Type.: GAS RECOVERY COMPLETION 14. I Hereby certify that the foregoing is true and correct. Title: Staff Regulatory Tech. Date: 2/4/2011 Signed



Date:

Title:

(This Space for Federal or State Office Use)

CONDITION OF APPROVAL, if any:

APPROVED BY: