

RECEIVED

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

APR 12 2011

AMENDED

Sundry Notices and Reports on Wells

Farmington Field Office
Bureau of Land Management

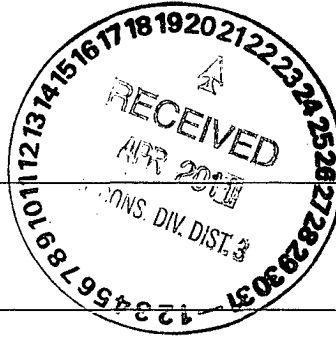
1. Type of Well
GAS

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

4. Location of Well, Footage, Sec., T, R, M
Unit L (NWSW), 1745' FSL & 840' FWL, Section 28, T28N, R9W, NMPM

5. Lease Number
SF-077107-A
6. If Indian, All. or
Tribe Name
7. Unit Agreement Name
8. Well Name & Number
Hancock B 12
9. API Well No.
30-045-21561
10. Field and Pool
Otero CH/Basin FC
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 type="checkbox"/> Subsequent Report	<input checked="" 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
		<input type="checkbox"/> Other - _____

13. Describe Proposed or Completed Operations

Burlington Resources requests permission to recompleat the Fruitland Coal formation of the subject well per the attached procedure, current wellbore schematic and C102. C107A will be submitted as soon as possible.

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

Signed Crystal Tafoya Crystal Tafoya

Title: Staff Regulatory Technician

Date 4/12/11

(This space for Federal or State Office use)

APPROVED BY Original Signed: Stephen Mason Title _____

Date _____

APR 13 2011

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.

NMOCB

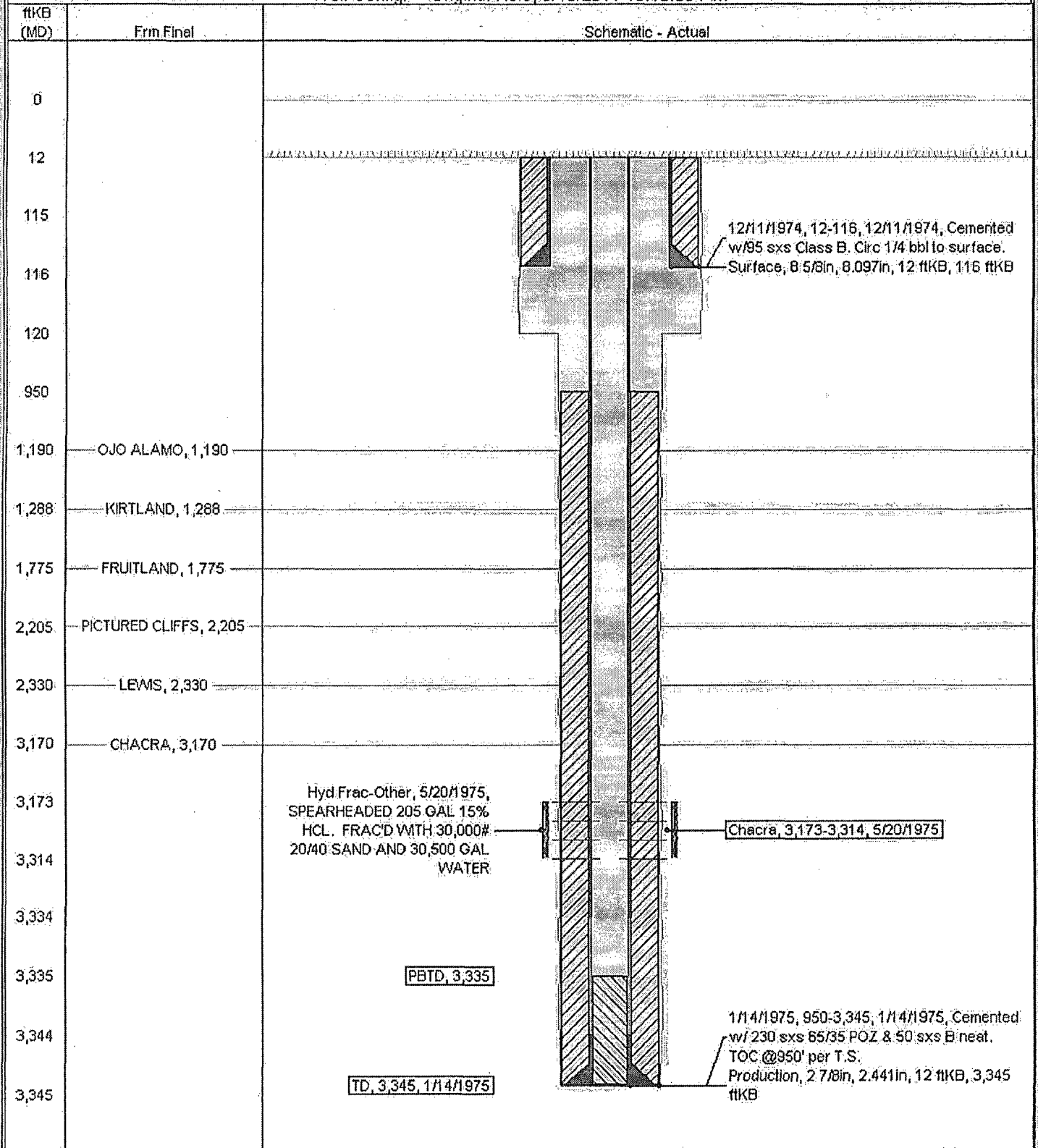
Current Schematic

ConocoPhillips

Well Name: HANCOCK B #12

API/UVI 3004521561	Surface Legal Location NMPM,028-028N-009W	Field Name OTERO (CHACRA) GAS	License No.	State/Province NEW MEXICO	Well Configuration Type Edit
Ground Elevation (ft) 6,030.00	Original KID/T Elevation (ft) 6,042.00	KID-Ground Distance (ft) 12.00	KID-Casing Flange Distance (ft)	KID-Tubing Hanger Distance (ft)	

Well Config: - Original Hole, 5/10/2011 10:18:33 AM



Hancock #B-12

**Unit L, Section 28, Township 28N, Range 9W
San Juan Co., NM
API#: 30-045-21561**

Fruitland Coal Recompletion Sundry

7/13/09

1. RU wireline service. Set 2-1/2" Bridge Plug above top of Chacra at 3,140'. Load hole with water. Run CBL, CCL, GR & CNL to surface.
2. MIRU well head company. Change out well head as required. NU 5,000 psig frac valve.
3. MIRU wireline company. Perforate 1st stage FC w/strip gun
4. MIRU Frac Company. Fracture stimulate the 1st stage Fruitland Coal.
5. Set CFP above 1st stage.
6. Perforate 2nd stage FC w/strip gun. RDMO wireline company.
7. Fracture stimulate the 2nd stage Fruitland Coal.
8. RDMO stimulation company.
9. MIRU flowback company.
10. Flowback frac fluid to steel flowback tank.
11. MIRU Wireline Company. Set CBP above top of 2nd stage FC. Blow down casing. RDMO flow back and wireline companies.
12. RD frac valve & RU well head.
13. MIRU 1-1/4" coiled tubing unit and related equipment. RIH w/bit and scraper. Dill out CBP and CFP. Circulate hole clean with air-foam to CBP above Chacra. Record flow rates and pressures for FC.
14. DO CBP and clean out hole to PBTD. Record flow rates and pressures for entire well bore.
15. RDMO coiled tubing and related equipment. Turn over to production.

District I

1625 N. French Dr., Hobbs, NM 88240
Phone:(505) 393-6161 Fax:(505) 393-0720

District II

1301 W. Grand Ave., Artesia, NM 88210
Phone:(505) 748-1283 Fax:(505) 748-9720

District III

1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170

District IV

1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources

Oil Conservation Division**1220 S. St Francis Dr.****Santa Fe, NM 87505**

Form C-102
Permit 126078

WELL LOCATION AND ACREAGE DEDICATION PLAT

1. API Number 30-045-21561	2. Pool Code 71629	3. Pool Name BASIN FRUITLAND COAL (GAS)
4. Property Code 7078	5. Property Name HANCOCK B	6. Well No. 012
7. OGRID No. 14538	8. Operator Name BURLINGTON RESOURCES OIL & GAS COMPANY LP	9. Elevation 6030

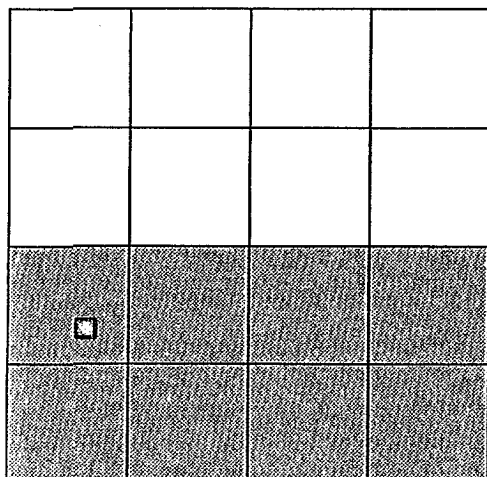
10. Surface Location

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
L	28	28N	09W		1745	S	840	W	SAN JUAN

11. Bottom Hole Location If Different From Surface

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
12. Dedicated Acres 320.00 (S/2)	13. Joint or Infill	14. Consolidation Code	15. Order No.						

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

**OPERATOR CERTIFICATION**

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location(s) or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Crystal Tafoya 1/20/11

E-Signed By: **Crystal Tafoya**
Title: **Staff Regulatory Technician**
Date: **January 20, 2011**

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Surveyed By: David O. Kilven
Date of Survey: 7/3/1974
Certificate Number: 1760