

submitted in lieu of Form 3160-5

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
BLM

Sundry Notices and Reports on Wells  
95 APR 26 PM 2:42

1. Type of Well  
GAS

070-THIRTEENTH, NM

5. Lease Number  
SF-079491A  
6. If Indian, All. or  
Tribe Name

2. Name of Operator

**BURLINGTON  
RESOURCES**

OIL & GAS COMPANY

RECEIVED  
MAY 24 1999

Unit Agreement Name

3. Address & Phone No. of Operator

PO Box 4289, Farmington, NM 87499 (505) 326-9700

OIL CON. DIV.  
DIST. 3

8. Well Name & Number  
San Juan 27-5 U #113  
9. API Well No.  
30-039-20201  
10. Field and Pool  
Blanco MV/Basin DK  
11. County and State  
Rio Arriba Co, NM

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

1150' FNL', 950' FEL, Sec. 10, T-27-N, R-5-W, NMPM

A

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

Type of Submission

☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment

Type of Action

☒ Abandonment  
☒ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☐ Other -  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut off  
☐ Conversion to Injection

13. Describe Proposed or Completed Operations

It is intended to recomplate the Mesaverde formation in the subject well as follows:

MIRU, ND WH, NU BOP and pull the production tubing. A CIBP will be set at approximately 6850' above the Dakota formation. The Mesaverde will be perforated and fracture stimulated in the following intervals: 4989-5552', 5735-6189'. 6250-6696'. After stimulation flowback, the CIBP above the Dakota formation will be drilled out and tubing landed at approximately 8550'. The well will then be commingled. A down-hole commingle application has been filed.

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

Signed \_\_\_\_\_ (KCPUD) Title Regulatory Administrator Date 4/20/99

(This space for Federal or State Office use)

APPROVED BY /s/ Duane W. Spencer  
CONDITION OF APPROVAL, if any:

Title Team Lead, Petroleum Management

Date MAY 21 1999

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.

②

NMOC

✓

District I  
PO Box 1980, Hobbs, NM 88241-1980  
District II  
PO Drawer DD, Artesia, NM 88211-0719  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

Form C  
Revised February 21,  
Instructions on  
Submit to Appropriate District C  
State Lease - 4 Co  
Fee Lease - 3 Co

RECEIVED  
99 APR 26 PM 2:42  
070 FEE...STON, NM

☐ AMENDED REP

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-039-20201		Pool Code 72319/71599	Pool Name Blanco Mesaverde/Basin Dakota
Property Code 7454	Property Name San Juan 27-5 Unit		Well Number 113
OGRID No. 14538	Operator Name Burlington Resources Oil & Gas Company		Elevation 7337' GI

10 Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
A	10	27N	5W		1150	North	950	East	RA

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

12 Dedicated Acres MV-E/320 DK-N/320	13 Joint or Infill	14 Consolidation Code	15 Order No.
--	--------------------	-----------------------	--------------

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

16  Original plat from David O. Vilven 5-2-69			1150'  950'	17 OPERATOR CERTIFICAT  I hereby certify that the information contained herein true and complete to the best of my knowledge and be
				Signature Peggy Bradfield Printed Name Regulatory Administrat Title
				Date
				18 SURVEYOR CERTIFICAT  I hereby certify that the well location shown on this p was plotted from field notes of actual surveys made b or under my supervision, and that the same is true an correct to the best of my belief.
				Date of Survey Signature and Seal of Professional Surveyor:
				Certificate Number

OK @