

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
OCT - 8 1999

Sundry Notices and Reports on Wells

1. Type of Well
GAS

2. Name of Operator

**BURLINGTON
RESOURCES**

OIL & GAS COMPANY

3. Address & Phone No. of Operator

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

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

890' FNL, 1745' FEL, Sec. 33, T-27-N, R-4-W, NMPM

DHC-2411

5. Lease Number
SF-080675

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
San Juan 27-4 Unit
San Juan 27-4 U #102

9. API Well No.
30-039-20833

10. Field and Pool
Blanco MV/Basin DK

11. County and State
Rio Arriba Co, NM

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

Type of Submission

Type of Action

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back	<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 checked="" type="checkbox"/> Other - Commingle	

13. Describe Proposed or Completed Operations

8-30-99 MIRU. ND WH. NU BOP. TIH, tag up @ 6624' (top of pkr). TOOH w/20 jts
1 1/2" tbq. SDON.
8-31-99 TOOH w/187 jts 1 1/2" tbq. TOOH w/2 3/8" tbq & seal assembly. TIH w/pkr
plucker. SDON.
9-1-99 Establish circ. latch pkr, TOOH. SDON.
9-2-99 TIH, blow well & CO to PBTD @ 8462'. SDON.
9-3-99 Blow well & CO. TOOH. TIH w/265 jts 2 3/8" 4.7# J-55 EUE tbq, landed @
8367'. ND BOP. NU WH. PT tbq to 500 psi/15 min, OK. RD. Rig released.

Well will produce as a Mesaverde/Dakota commingle under DHC-2411

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

Signed [Signature] Title Regulatory Administrator Date 9/7/99

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date 1999

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