

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

1. Operator Name and Address Burlington Resources Oil & Gas Company PO Box 4289 Farmington, New Mexico 87499		OGRID Number 14538	
4. API Number 30-039-26084		6. Pool Code 72319	
7. Property Code 7454		9. Well Number 144M	
8. Property Name San Juan 27-5 Unit			

10. Surface Location

UI or lot no I.	Section 35	Township 27N	Range 5W	Lot Idn	Feet from the 1685	North/South line South	Feet from the 995	East/West line East	County Rio Arriba
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11. Bottom Hole Location

UI or lot no	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
12. Use Code F	13. Producing Method Code Flowing	14. Gas Connection Date	15. C-129 Permit Number	16. C-129 Effective Date	17. C-129 Expiration date				

III. Oil and Gas Transporters

18. Transporter OGRID	19. Transporter Name and Address	20. POD	21. O/G	22. POD ULSTR Location and Description
9018		2824404	O	
25244	Giant Industries	2824405	G	
	Williams Field Services			

IV. Produced Water

23. POD 2824405	24. POD ULSTR Location and Description
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V. Well Completion Data

25. Spud Date 8/26/99	26. Ready Date 11/13/99	27. TD 8444	28. PBTD 8440	29. Perforations 4940-6515	30. DHC, DC, MC DHC
30. Hole Size 12 1/4 8 3/4 6 1/4	31. Casing & Tubing Size 9 5/8 7 4 1/2 2 3/8	32. Depth Set 622 4225 4024-8443 8405	33. Sacks Cement 413 cu.ft. 1421 cu.ft. 632 cu.ft.		

VI. Well Test Data

34. Date New Oil	36. Test Date 11/13/99	37. Test Length	38. Tbg. Pressure SI 472	39. Csg. Pressure SI 816
40. Choke Size	41. Oil	42. Water	43. Gas 643	44. AOF
45. Test Method Shut-in				

46. I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		OIL CONSERVATION DIVISION	
Signature <i>Peggy Cole</i>		Approved by: <i>[Signature]</i> SUPERVISOR DISTRICT #3	
Printed Name Peggy Cole		Title:	
Regulatory Administrator		Approval Date: NOV 19 1999	
11/16/99 Telephone No. (505) 326-9700			
47. If this is a change of operator fill in the OGRID number and name of the previous operator			
Printed Name		Title	
		Date	