Signe's

APPRCVED BY

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

	Sundry Notices and Reports on Wells		
		5.	Lease Number SF-079521A
1. T	ype of Well GAS	6.	If Indian, All. or Tribe Name
		7.	Unit Agreement Name
	ame of Operator		
<u>د</u> د	BURLINGTON RESOURCES OIL & GAS COMPANY		San Juan 28-5 Unit
	OII & GAD COMPANI	8.	Well Name & Number
3. Address & Phone No. of Operator			San Juan 28-5 U #1
	PO Box 4289, Farmington, NM 87499 (505) 326-9700	9.	API Well No. 30-039-07330
4. L	ocation of Well, Footage, Sec., T, R, M	10.	Field and Pool
1	650'FNL, 1650'FEL, Sec.29, T-28-N, R-5-W, NMPM	2.2	Blanco Mesaverde
		11.	County and State Rio Arriba Co, NM
			·
	CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, RE		DATA
T	Type of Submission Type of Action X Notice of Intent Abandonment		ans
	Recompletion	New Čonstruc	tion
	Subsequent Report Plugging Back	Non-Routine	Fracturing
	Casing Repair Final Abandonment Altering Casing	Water Shut o	tt n Injection
	X Other - Pay add	conversion e	J Injection
		*	
13.	Describe Proposed or Completed Operations		
	It is intended to add the Lewis Shale to the existing per a cast iron bridge plug over the existing per Lewis. The wellbore will then be cleaned to production tubing landed. Please provide sur	rforations a plug back to	and stimulating the otal depth and
	ા મામલા કરવા કરવા છે. આ મામલા કરવા માટે કરવા કરવા કરવા કરવા કરવા છે. માના મામલા કરવા કરવા કરવા કરવા કરવા છે. આ આ મામલા કરવા કરવા કરવા કરવા કરવા કરવા કરવા કરવ	<u> </u>	
			.=_
	DEC 2000		
	DEC 2000	6-1 1-1 1-1 1-1 1-1	
	DEC 2000 RECEIVED		
	DEC 2000 PECEIVED OILCON. DIV DIST. 3		
	DEC 2000 RECEIVED OILCON. DIV DIST. 3		
	DEC 2000 RECEIVED OIL CON. DIV DIST. 3		
	DEC 2000 RECEIVED OILCON. DIV DIST. 3		
	DEC 2000 RECEIVED OILCON. DIV DIST. 3		
	DEC 2000 RECEIVED OILCON. DIV DIST. 3 I hereby certify that the foregoing is true and cor		

Title 18 U.S.C. Section 1001, makes it a crime for any person knowing y 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.

(This space for Federal or State Office use)

CONDITION OF APPROVAL, if any:

_Title

Title Regulatory Supervisor