

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells 1:45

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

1800' FNL, 1170' FWL, Sec. 31, T-27-N, R-10-W, NMPM

5. Lease Number
SF-078422

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name
Huerfano Unit

8. Well Name & Number
Huerfano Unit #78

9. API Well No.
30-045-06160

10. Field and Pool
West Kutz Pict'd Clfs

11. County and State
San Juan Co, 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 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	

13. Describe Proposed or Completed Operations

Due to a casing leak, it is intended to set a production packer above the perforated intervals. The well will be produced up through the 1 1/2" tubing, and pressure will be monitored annually on the backside and bradenhead.

Verbal approval received on 3-22-99 @ 10:00 a.m. by Jim Lovato, BLM.

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

Signed John Stallucci Title Regulatory Administrator Date 3/31/99
vkh

(This space for Federal or State Office use)

APPROVED BY Jim Lovato Title Acting Team Lead Date 4/2/99

CONDITION OF APPROVAL, if any:

Title 18 U.S.C. Section 1001. makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

NMOCB