UNITED STATES

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

. Type of Well GAS		5. 6.	Lease M SF-0783 If Ind: Tribe M	357 ian, All. c
		6.	If Ind	ian, All. c
		0.		
GAS			11100	Name
			Unit Agreement Na	
		7.		
. Name of Operator				
BURLINGTON RESOURCES OTLE G				
OIL & GAS COMPANY 3. Address & Phone No. of Operator		8.	Well N	ame & Numbe
			Marshall #4	
PO Box 4289, Farmington, NM 87499 (505) 326-9700		9.	API We	
		1.0	30-045-06 10. Field and	
4. Location of Well, Footage, Sec., T, R, M		10.		Mesaverde
810'FNL, 975'FEL, Sec.15, T-27-N, R-9-W, NMPM A		11.	County	and State
·			San Ju	an Co, NM
	OF WOMEON DEE	מקציים חיים	DATA	
12. CHECK APPROPRIATE BOX TO INDICA	ATE NATURE OF NOTICE, REP Type of Action	ORI, OINER	DRIB	
Type of Submission _X_ Notice of Intent _X		nange of Pl	ans	
-	Recompletion No	ew Construc	tion	
Subsequent Report	Plugging Back No	on-Routine	Fractur	ing
	Casing Repair Wa	ater Shut c	ii o Trioc	rtion
Final Abandonment	Altering Casing Co	onversion C	o mjec	CION
-	Other -			
13. Describe Proposed or Complet	ed Operations			
		n dotaile	a proced	ture and
It is intended to plug and a	bandon the subject well. l be submitted by 8-15-97	7.	r proces	iare and
wellbore diagram will	The Submitteed by the second		_	v 7
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	to the same of			
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	May -		2 - 2 2 - 3	
	THAT YOU KAY BY			
	Property of the second			
	- Very being BIV.			
14. I hereby certify that the fo	oregoing is true and corn	rect.		
S A	1.		or Dato	5/14/97
\/\l_ \/_				
Signed Y ancy tmans	_(ROS1).Title Regulatory A	Administrat	MAY	7, 2