

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

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BLM

NOV 25 PM 2:20

070 FARMINGTON, NM

1. Type of Well
GAS

5. Lease Number
SF-079382
6. If Indian, All. or
Tribe Name
7. Unit Agreement Name

2. Name of Operator

**BURLINGTON
RESOURCES**

OIL & GAS COMPANY

3. Address & Phone No. of Operator

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

San Juan 30-6 Unit
8. Well Name & Number
San Juan 30-6 U #409
9. API Well No.
30-039-24186
10. Field and Pool
Basin Fruitland Coal
11. County and State
Rio Arriba Co, NM

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

2265' FSL, 715' FWL, Sec. 25, T-30-N, R-7-W, NMPM

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 - Recavitate	

13. Describe Proposed or Completed Operations

It is intended to workover the well in the following manner:

Pull the 2 7/8" tubing. Pull the 5 1/2" liner. Caviate the Fruitland Coal formation utilizing natural and air assisted surges until the well stabilizes. Clean the well to TD and run a 5-1/2", 15.5#, K-55 casing liner. The liner will be pre-perforated 4 spf across the coal intervals. Production tubing will be 2 7/8", 6.5#, J-55. The well will then be returned to production.

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

Signed Regan D. Radford (DSFTC) Title Regulatory Administrator Date 11/24/97

(This space for Federal or State Office use)

APPROVED BY /s/ Duane W. Spencer Title _____ Date DEC - 3 1997

CONDITION OF APPROVAL, if any:

NMOC