

submitted in lieu of Form 3160-5

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

SEP 11 1997  
C/O BUREAU OF LAND MANAGEMENT

1. Type of Well  
GAS

5. Lease Number  
NM-03385  
6. If Indian, All. or  
Tribe Name  
7. Unit Agreement Name

2. Name of Operator

**BURLINGTON  
RESOURCES**

OIL & GAS COMPANY

8. San Juan 30-6 Unit  
Well Name & Number  
San Juan 30-6 U #80A  
9. API Well No.  
30-039-25634  
10. Field and Pool  
Blanco MV/Basin DK  
11. County and State  
Rio Arriba Co, NM

3. Address & Phone No. of Operator  
PO Box 4289, Farmington, NM 87499 (505) 326-9700

4. Location of Well, Footage, Sec., T, R, M  
875' FNL, 1800' FWL, Sec. 17, T-30-N, R-6-W, NMPM

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

Type of Submission

- Notice of Intent
- Subsequent Report
- Final Abandonment

Type of Action

- Abandonment
- Recompletion
- Plugging Back
- Casing Repair
- Altering Casing
- Other - Spud
- Change of Plans
- New Construction
- Non-Routine Fracturing
- Water Shut off
- Conversion to Injection

13. Describe Proposed or Completed Operations

9-6-97 MIRU. Spud well @ 11:15 a.m. 9-6-97. Drill to 230'. Circ hole clean. TO  
TIH w/5 jts 9 5/8" 32.3# WC-40 ST&C csg, set @ 225'. Cmtd w/165 sx (C  
"B" neat cmt w/3% calcium chloride, 0.25 pps Flocele (190 cu.ft.).  
16 bbl cmt to surface. WOC. NU BOP. PT BOP & csg to 600 psi/30 min,  
Drilling ahead.

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

Signed [Signature] Title Regulatory Administrator Date 9/8/97

(This space for Federal or State Office use)  
APPROVED BY \_\_\_\_\_ Title \_\_\_\_\_  
CONDITION OF APPROVAL, if any:

ACCEPTED BY \_\_\_\_\_  
Date \_\_\_\_\_

SEP 1

FARMINGTON

BY \_\_\_\_\_

NMOCD

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Casing Repair

Water Shut off

Altering Casing

Conversion to Injection

Other -

13. Describe Proposed or Completed Operations

9-9-97 Drill to intermediate TD @ 3459'. Circ hole clean. TOOH. TIH w/84 jts 7" 20# J-55 ST&C csg, set @ 3459'. Cmtd first stage w/200 sx Class "B" 50/50 poz w/2% gel, 1% calcium chloride, 10 pps Gilsonite, 0.5 pps Flocele (230 cu.ft.). 100% returns, no cmt to surface.

9-10-97 Stage tool set @ 2677'. Cmtd second stage w/377 sx Class "B" 65/35 poz w/6% gel, 2% calcium chloride, 0.25 pps Flocele, 5 pps Gilsonite (697 cu.ft.). Tailed w/100 sx Class "B" neat cmt w/2% calcium chloride, 5 pps Gilsonite, 0.25 pps Flocele (115 cu.ft.). Returned pre-flush to surface, no cmt. WOC. PT BOP & csg to 1500 psi/30 min, OK. Drilling ahead.

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

Signed [Signature] Title Regulatory Administrator Date 9/11/97

(This space for Federal or State Office use)

APPROVED BY \_\_\_\_\_ Title \_\_\_\_\_

Date **ACCEPTED FOR RECORD**

CONDITION OF APPROVAL, if any:

SEP 17 1997

NMOCD

FARMINGTON DISTRICT OFFICE

BY \_\_\_\_\_