

submitted in lieu of Form 3160-5

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

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

1725' FNL, 1810' FWL, Sec. 7, T-30-N, R-6-W, NMPM

5. Lease Number  
SF-079002

6. If Indian, All. or  
Tribe Name

7. Unit Agreement Name

San Juan 30-6 Unit  
Well Name & Number  
San Juan 30-6 U #123  
9. API Well No.  
30-039-26002  
10. Field and Pool  
Basin Dakota  
11. County and State  
Rio Arriba Co, NM

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

Type of Submission

Type of Action

|   |   |  |
|---|---|--|
| <input type="checkbox"/> Notice of Intent             | <input type="checkbox"/> Abandonment                    | <input type="checkbox"/> Change of Plans         |
| <input checked="" 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 - Restimulate |  |

13. Describe Proposed or Completed Operations

9-16-99 MIRU. Pump 125 bbl 2% KCl wtr to load hole. Pump 95 bbl KSS-2000 down tbg.  
Flush w/40 bbl 2% KCl wtr. SDON.  
9-17/20-99 TIH, blow well & CO. SDON.  
9-21-99 Blow well & CO. RD.

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

Signed Nancy Oltermann - for Title Regulatory Administrator Date 9/28/99  
no

(This space for Federal or State Office use)

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

CONDITION OF APPROVAL, if any:

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

NMOCD