

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
1650' FNL 1550' FEL, Sec. 8, T-30-N, R-9-W, NMPM

5. Lease Number
SF-078129

6. If Indian, All. or Tribe Name

Unit Agreement Name

Well Name & Number
Pierce #4

9. API Well No.
30-045-20092

10. Field and Pool
Blanco Pictured Cliffs

11. County and State
San Juan Co, NM

RECEIVED
JUN 2 9 1999

OIL CONL DIV
DIST 3

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

5-4-99 MI. SDON.

5-5-99 RU. ND WH. NU BOP. TOOHH w/1 1/4" IJ tbg. TIH w/RBP, set @ 2932'.
PT 2-7/8" csg to 3500 psi/15 min, OK. SDON.

5-6-99 Rls RBP & TOOHH. ND BOP. NU frac valve. RD. Rig released.

5-26-99 RU. PT lines to 4500 psi, OK. Frac PC w/575 bbl 30# to 35# linear
gel, 577,000 SCF N2, 179,000# of 20/40 AZ snd. RD. Flow back well.

5-27/30-99 Flow back well. Shut-in well. WO bailer.

6-9-99 Flow back well. TIH w/bailer. Bail sand @ 3082'. Flow well.
TOOH w/bailer. RD. Well turned over to production.

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

Signed [Signature] Title Regulatory Administrator Date 6/17/99
TLW

(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 to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

OFFICE

AMC