

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
800' FNL, 1730' FEL, Sec. 34, T-30-N, R-12-W, NMPM

5. Lease Number
NMSF-077922

6. If Indian, All. or
Tribe Name

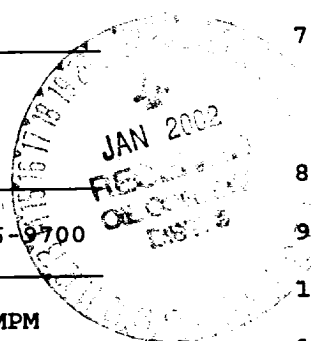
7. Unit Agreement Name

8. Well Name & Number
McGrath SWD #4

9. API Well No.
30-045-25923

10. Field and Pool
SWD Mesaverde

11. County and State
San Juan 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other -
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

12-15-01 MIRU. TIH w/2 1/8" gauge ring through Model "R" pkr @ 4236'. Tag top of fill @ 4616'. TOOH. TIH w/RBP, set @ 5262'. TOOH. ND WH. NU BOP. PT 7" BOP stack to 1800 psi/15 min, OK. TIH w/retrieving tool. Attempt to release pkr. SDON.

12-16-01 TIH w/2 7/8" CIBP, set @ 3976'. (Pkr @ 3981'). SDON.

12-17-01 TOOH w/pkr & CIBP. SDON.

12-18-01 PT csg to 3000 psi/15 min, OK. TIH w/134 jts 2 7/8" plastic coated 6.5# J-55 tbg & 4 1/2" pkr; set pkr @ 4233', landed tbg @ 4249'.

12-19-01 PT tbg & pkr to 2200 psi/30 min, OK. (Bruce Martin, OCD on location to witness PT). PT 5 1/2" csg to 1000 psi/30 min, OK. Circ down tbg & up annulus w/100 bbl pkr fluid. ND BOP. NU WH. RD. Rig released.

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

Signed [Signature] Title Regulatory Supervisor

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

Date 1/16/02
ACCEPTED FOR RECORD

BUREAU OF LAND MANAGEMENT OFFICE