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

5. **Lease Number**
SF-080113

6. **If Indian, All. or Tribe Name**

7. **Unit Agreement Name**

2. **Name of Operator**
BURLINGTON RESOURCES OIL & GAS COMPANY

8. **Well Name & Number**
Hartman Com #4

9. **API Well No.**
30-045-26845

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

10. **Field and Pool**
Blanco Mesaverde

4. **Location of Well, Footage, Sec., T, R, M**
1450'FNL, 790'FEL, Sec.26, T-30-N, R-11-W, NMPM
H

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		
___ Notice of Intent	___ Abandonment	___ Recompletion	___ Plugging Back
_X_ Subsequent Report	___ Casing Repair	___ Altering Casing	_X_ Other - Pay add
___ Final Abandonment	___ Change of Plans	___ New Construction	___ Non-Routine Fracturing
	___ Water Shut off	___ Conversion to Injection	

13. Describe Proposed or Completed Operations

10-23-96 MIRU. ND WH. NU BOP. TOOH w/152 jts 2 3/8" tbg. TIH w/RBP, set @ 4750'. TOOH. TIH w/pkr, set @ 4402'. Load hole w/132 bbl 1% Kcl wtr. PT csg @ 30-4402' to 3000 psi, OK. Release pkr, TOOH. SDON.

10-24-96 TIH to 4402, latch RBP. TOOH. TIH w/4 1/2" FB pkr, set @ 4735'. Load tbg w/wtr PT RBP to 3000 psi, OK. Release pkr. Spot 300 gal 15% Hcl @ 4306-4702'. TOOH w/FB pkr. TIH, spot sd on RBP. Perf Menefee @ 4308-4678' w/17 0.29" holes total. TOOH. Acidize w/1500 gal 15% Hcl. Frac Menefee w/4483 bbl slk wtr, 147,000# 20/40 Arizona sd. SDON.

10-25/29-96 TIH, blow well & CO.

10-30-96 Blow well & CO. TOOH. TIH w/retrieving tool. Blow well & CO. Latch RBP, TOOH. Blow well & CO.

10-31-96 Blow well & CO.

11-1/3-96 Blow well & CO.

11-4-96 Blow well & CO. TOOH. TIH, ran after frac log @ 4000-5129'. Blow well & CO. TOOH. TIH w/146 jts 2 3/8" 4.7# J-55 8RD EUE tbg, landed @ 4813'. ND BOP. NU WH. RD. Rig released.

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

Signed Peggy Bradfield Title Regulatory Administrator Date 11/5/96

(This space for Federal or State Office use)
APPROVED BY _____ Title _____ Date **ACCEPTED FOR RECORD**
CONDITION OF APPROVAL, if any:

NOV 0 8 1996

FARMINGTON DISTRICT OFFICE

NMOCD