UNITED STATES

ONITED STATES						
DEPARTME	ENT	OF	THE	INTERIOR		
BUREAU	OF	LAN	ID MA	NAGEMENT		

Sundry Noti	ces and Reports on Wel	ls ,	
1. Type of Well GAS	00.150	23 77 1: 41 5.	Lease Number SF-078439 If Indian, All. or Tribe Name Unit Agreement Name
2. Name of Operator		/ .	Unit Agreement Name
BURLINGTON	GAS COMPANY	8.	Well Name & Number
3. Address & Phone No. of Operat PO Box 4289, Farmington, NM	or 87499 (505) 326-9700	9.	Johnston Federal #29
4. Location of Well, Footage, Se 1550'FSL, 1210'FWL, Sec.7, T-	C., T, R, M 31-N, R-9-W, NMPM		Field and Pool Basin Fruitland Coal County and State San Juan Co, NM
12. CHECK APPROPRIATE BOX TO IND	ICATE NATURE OF NOTICE	, REPORT, OTHER	DATA
Type of Submission _X_ Notice of Intent Subsequent Report	Type of Ac Abandonment Recompletion Plugging Back	Change of Pla	ans tion Fracturing
Final Abandonment	Recompletion Plugging Back Casing Repair Altering Casing X Other - Recavitat	Water Shut o Conversion to	ff o Injection
13. Describe Proposed or Compl	eted Operations		
It is intended to recavita	ate the subject well ir	the following	manner:
stabilizes. Clean	g. Pull the 5 1/2" line g natural and air assi the well to total dept ill be pre-perforated the production tubing.	sted surges unti h. Run a 5 1/2" with 4 SPF acros The well will t	Il the well 15.5# K-55 casing as the coal then be returned
		ub APR 2	7 7353 -
		981 COL IEI	I. DIV. . 3
		en e	
14. I hereby certify that the Signed May Mill huld	foregoing is true and (DWSFTC) Title Regula		tor_Date 4/21/98
(This space for Federal or State APPROVED BY CONDITION OF APPROVAL, if any:	e Office use) Title	Date _	APR 2 4 1998