

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
BLM

Sundry Notices and Reports on Wells  
98 DEC -2 AM 9:38

1. Type of Well  
GAS

070 FARMINGTON, NM

5. Lease Number  
SF-078505  
6. If Indian, All. or  
Tribe Name  
7. Unit Agreement Name

2. Name of Operator

**BURLINGTON  
RESOURCES**

OIL & GAS COMPANY

RECEIVED  
DEC 18 1998

3. Address & Phone No. of Operator

PO Box 4289, Farmington, NM 87499 (505) 666-9700

OIL CON. DIV.  
DIST. 3

4. Location of Well, Footage, Sec., T, R, M

840' FNL 1820' FEL, Sec. 24, T-31-N, R-9-W, NMPM

8. Well Name & Number  
Seymour #721  
9. API Well No.  
30-045-28409  
10. Field and Pool  
Basin Fruitland Coal  
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 checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment                   | <input type="checkbox"/> Change of Plans         |
| <input 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 - recavitate |  |

13. Describe Proposed or Completed Operations

It is intended to recavitate the subject well in the following manner:

MIRU. Pull the tubing. Pull the 5 1/2" liner. Cavitare the Fruitland Coal formation utilizing natural and air assisted surges until the well stabilizes. Clean the well to TD and run a 5 1/2", 15.5#, K-55 casing liner. The liner will be pre-perforated 4 SPF across the coal intervals. Re-run the production tubing. The well will then be returned to production.

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

Signed [Signature] Title Regulatory Administrator Date 11/25/98  
TLW

(This space for Federal or State Office use)

APPROVED BY /S/ Duane W. Spencer Title \_\_\_\_\_ Date DEC 16 1998

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.