

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

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
2365' FSL, 1935' FWL, Sec.9, T-30-N, R-10-W, NMPM

5. Lease Number
NMSF077730

6. If Indian, All. or Tribe Name

7. Unit Agreement Name

8. Well Name & Number
Sunray E #2M

9. API Well No.
30-045-30838

10. Field and Pool
Blanco MV/Basin DK

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 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 - casing, & cement	

13. Describe Proposed or Completed Operations

3/6/02 Drill to intermediate TD @ 3300'. Circ hole clean. TOOH. TIH w/77 jts 7" 23# J-55 LT&C csg, set @ 3296'. Stage tool set @ 2359'. Cmtd 1st stage w/88 sxs Premium Lite FM w/2% calcium chloride, 0.25 pps celloflake, 4% fluid loss, 5 pps LCM, 8% gel, 4% sodium metasilicate (187 cu. Ft.). Circ 20 bbls cmt to surface.

3/7/02 Cmtd 2nd stage w/90 sxs Type 3 w/1% calcium chloride, 0.25 pps celloflake, 2% fluid loss (124 cu. Ft.). Circ 35 bbls cmt to surface. WOC. PT BOP & csg to 1500 psi, OK. Drilling ahead.

3/9/02 Drill to TD @ 7593'. Blow hole clean. TOOH.

3/11/02 TIH w/104 jts 4-1/2" 10.5# J-55 ST&C csg, set @ 7592'. Lnr top @ 3113'. Cmtd w/337 sxs Premium Lite w/6% gel, 0.3% CD-32, 1% fluid loss, 0.25 pps flocele, 6.25 pps gilsonite (667 cu. Ft.). Circ 12 bbls cmt to surface. ND BOP. NU WH. RD. Rig released.

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

Signed *Dorothy Cole* Title Regulatory Supervisor Date 3/18/02

(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.

