UNITED STATES

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

Sundry Not	ices and Reports on Wells		1
		5.	Lease Number
1. Type of Well GAS		6.	If Indian, All. or Tribe Name
2. Name of Operator	SEP 3 0 1999 D	7.	Unit Agreement Name
BURLINGTON	The National State of the Control of		
かどぐろわかとせぐ	& GAS COMPANY		
	<u></u>	8.	
3. Address & Phone No. of Opera PO Box 4289, Farmington, NM		9.	Reese Mesa #100 API Well No. 30-045-27008
4. Location of Well, Footage, Sec., T, R, M		10). Field and Pool
1450'FSL, 805'FWL, Sec.13, T	-32-N, R-8-W, NMPM		Basin Frutiland Co.
		13	County and State San Juan Co, NM
Subsequent Report		tine	Fracturing
Final Abandonment	Plugging Back Non-Route Casing Repair Water Sl Altering Casing Convers X_ Other - Pump Installation	tine hut	Fracturing
Final Abandonment Describe Proposed or Comp	Plugging Back Non-Route Casing Repair Water Sl Altering Casing Convers X_ Other - Pump Installation Cleted Operations the subject well to production af	tine hut ion	e Fracturing off to Injection
Final Abandonment Describe Proposed or Comp It is intended to return during the next three to	Plugging Back Non-Rouge Casing Repair Water SI Altering Casing Converse X_ Other - Pump Installation Sleted Operations the subject well to production affisix months.	tine hut	e Fracturing off to Injection installation of a pur
Final Abandonment 13. Describe Proposed or Comp It is intended to return during the next three to 14. I hereby certify that the Signed May Well.	Plugging Back Non-Rout Casing Repair Water SI Altering Casing Convers X_ Other - Pump Installation Dleted Operations the subject well to production af six months. ### foregoing is true and correct. Title Regulatory Administrato tro	tine hut	e Fracturing off to Injection installation of a pur
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FARMING OF TIELD OFFICE