

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

1650' FSL, 1635' FWL, Sec. 28, T-32-N, R-6-W, NMPM

5. Lease Number  
SF-081155

6. If Indian, All. or  
Tribe Name

7. Unit Agreement Name  
Allison Unit

8. Well Name & Number  
Allison Unit #118

9. API Well No.  
30-045-27131

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 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 - Recavitation	

13. Describe Proposed or Completed Operations

10-5-00 MIRU. TOOH w/pump & rods. ND WH. NU BOP. TOOH w/2 3/8" tbg. SDON.  
10-6-00 TIH, engage lnr hanger & pull free. TOOH w/4 jts 5 1/2" csg. Blow  
well. SDON.  
10-7/18-00 TIH w/bit. Blow well & CO to TD @ 3415'.  
10-19-00 CO to TD @ 3415'. TOOH w/bit. TIH w/4 jts 5 1/2" 15.5# K-55 LT&C csg,  
set @ 3415'. Lnr top @ 3281'. Lnr pre-perf @ 3350-3413'. TIH w/  
perf mill. SDON.  
10-20-00 Mill perf plugs @ 3350-3413'. TOOH w/perf mill. TIH w/108 jts 2 3/8"  
4.7# J-55 tbg, set @ 3408'. SN @ 3384'. ND BOP. NU WH. TIH w/pump  
& rods. PT & pump action, OK. RD. Rig released.

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

Signed [Signature] Title Regulatory Supervisor Date 11/3/00

TLW

(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.

FOR RECORD

NOV 15 2000

11/15/00

[Signature] OFFICE