UNITED STATES

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

	5.	Lease Number SF-078439
1. Type of Well GAS	6.	If Indian, All. or Tribe Name
	7.	Unit Agreement Name
2. Name of Operator		
BURLINGTON RESOURCES OIL & GAS COMPANY		
3. Address & Phone No. of Operator	8.	Well Name & Number Johnston Federal #23
PO Box 4289, Farmington, NM 87499 (505) 326-970	9.	
4. Location of Well, Footage, Sec., T, R, M	10.	Field and Pool
1590'FSL 1000'FEL, Sec.35, T-31-N, R-9-W, NMPM	11.	Basin Fruitland Coal County and State
	11.	San Juan Co, NM
12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTI Type of Submission Type of Notice of Intent Abandonment X Subsequent Report Plugging Back Casing Repair Final Abandonment Altering Casing X Other - pump in	Action Change of Pla New Construct Non-Routine I Water Shut of	ans cion Fracturing ff
13. Describe Proposed or Completed Operations 6-16-99 MIRU. ND WH. NU BOP. TOOH w/2-3/8" t 6-17-99 CO to PBTD. Circ csg cln, flow well. 6-18-99 TOOH w/bit. TIH w/86 jts 2-3/8" 4.7# ND BOP. NU WH. TIH w/one 2" x 1 pump & rods. PT & pump action C	. SDON. # J-55 tbg, set @ 1 1 ¼" x 10' x 14' R	2745'. nac
(ō)	AUG CA 1888 AUG CA 1888 DIETO S	RECEIVED JUN 29 PM 12: 51 FAREACTON, NM
14. I hereby certify that the foregoing is true ar	A CONTRACTOR OF THE CONTRACTOR	account of the second
Signed Machine Title Regulatory	Administrator Date	CEPTED FOR RECORD
(milder and for medical) and Object (CSC) and (CSC)		**************************************
(This space for Federal or State Office use) APPROVED BY Title	Date	AUG 0 2 1999