

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

## Sundry Notices and Reports on Wells

1. Type of Well  
GAS

**RECEIVED**  
JUN 2 5 1997

07 JUN 13 PM 2:55

070 FARMINGTON, NM

2. Name of Operator

**BURLINGTON  
RESOURCES**

**OIL CON. DIV.  
DIST. 3**

OIL &amp; GAS COMPANY

3. Address &amp; Phone No. of Operator

PO Box 4289, Farmington, NM 87499 (505) 326-9700

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

1515' FSL, 1095' FEL, Sec. 23, T-32-N, R-10-W, NMPM

I

5. Lease Number  
SF-078504  
6. If Indian, All. or  
Tribe Name

7. Unit Agreement Name

San Juan 32-9 Unit  
8. Well Name & Number  
San Juan 32-9 U #49A  
9. API Well No.  
30-045-29443  
10. Field and Pool  
Blanco Mesaverde  
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 -	

## 13. Describe Proposed or Completed Operations

6-5-97 Drill to TD @ 6458'. Circ hole clean. TOOH.

6-6-97 TIH w/60 jts 4 1/2" 10.5# J-55 8RD ST&C lnr, set @ 6423'. Top of lnr @ 3881'. Pump 20 bbl gelled wtr, 10 bbl wtr ahead. Cmt'd w/158 sx Class "G" 65/35 poz w/6% gel, 0.25 pps Cellophane, 0.15% dispersant, 5 pps Kolite (292 cu.ft.). Tailed w/150 sx class "G" 50/50 poz w/0.25 pps Cellophane, 0.3% fluid loss, 2% gel, 10 pps accelerator (176 cu.ft.). Reverse out 16 bbl cmt to surface. WOC. PT lnr to 3000 psi/15 min, OK. ND BOP. NU WH. RD. Rig released.

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

Signed [Signature] Title Regulatory Administrator Date 6/11/97

(This space for Federal or State Office use)

APPROVED BY \_\_\_\_\_ Title \_\_\_\_\_

Date \_\_\_\_\_

CONDITION OF APPROVAL, if any: \_\_\_\_\_

**ACCEPTED FOR RECORD**

JUN 23 1997

FARMINGTON DISTRICT OFFICE

BY [Signature]

NMCCD