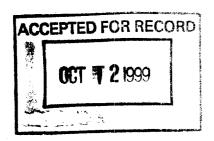
Form 3160-5 (November 1994)

New Mexico On Conservation Division District

CO	OH CONSCINSION DIOKARAKOAED.				
	1625 N.	French Expues No	u No. 1004-0135		

	AND MANAGEN		Hobbs.	NM L88240 N	lovember 30, 2000
SUNDRY NOTICES	NM 81633				
Do not use this form for paragraphs abandoned well. Use Form	6. If Indian, Allottee or Tribe Name				
SUBMIT IN TRIPLICATE -	Other instructions	on reverse side		7. If Unit or CA/A	Agreement, Name and/or N
I. Type of Well  X Oil Gas Well Other	8. Well Name and No.  CHECKERBOARD 23 #8				
2. Name of Operator BURLINGTON RESOURCES OIL & GAS COMP	FEDERAL  9. API Well No.				
3a. Address P. O. BOX 51810, MIDLAND, TEXAS 797	30-025-32626	, or Exploratory Area			
<ol> <li>Location of Well (Footage, Sec., T., R., M., or Survey Descrip G, 1980' FNL &amp; 1980' FEL SEC. 23, T22S, R32E</li> </ol>	WEST RED TANK DELAWARE RED TANK BONE SPRING  11. County or Parish, State				
	ATE 00//F0\ T0 //			LEA	NM
12. CHECK APPROPRIATIVE OF SUBMISSION	E OF ACTION	RT, OR OTHER DATA			
X Notice of Intent	X Acidize	Deepen		n (Start/Resume)	Water Shut-Off
Subsequent Report	Alter Casing  Casing Repair	Fracture Treat  New Construction	Reclamatic	··	Well Integrity Other
Final Abandonment Notice	Change Plans Convert to Inject	Plug and Abandon  Plug Back	Temporari	ily Abandon	
13. Describe Proposed or Coommpleted Operation (clear If the proposal is to deepen directionally or recomp Attach the Bond under which the work will be perfollowing completion of the involved operations. If testing has been completed. Final Abandonment No determined that the final site is ready for final inspection	ete horizontally, give so ormed or provide the lithe operation results in otices shall be filed on	ubsurface locations and measur Bond No. on file with BLM/E a multiple completion or reco	ed and true vert SIA. Required sumpletion in a ne	ical depths of all per absequent reports shall by interval a Form	rtinent markers and zone Il be filed within 30 day 3150-4 shall be filed on

ACIDIZE THE DELAWARE PERFORATION. SEE ATTACHED DETAILED PROCEDURE.



14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) MARIA L. PEREZ	Title REGULATORY TEC	CH.
Maria L. Pers	Date 10-7-99	
THIS SPACE FO	OR FEDERAL OR STATE OFFICE USE	<b>3</b>
Approved by DISTRICT   SUPERVISOR	Title	POCT 2 0 1999
Conditions of approval, if any, are attached. Approval of this notice do certify that the applicant holds legal or equitable title to those rights in which would entitle the applicant to conduct operations thereon.	es not warrant or the subject lease	

OCT 08 1999

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