(June 1990) DEPARTM		ED STATES OF THE INTERIOR AND MANAGEMENT	N.M. Oil Cons. 20, Box 1980	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993
			Hobbs, NM 88241	5. Lease Designation and Serial No. NM16139
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.				6. If Indian, Allottee or Tribe Name
	se "APPLICATION FOR F			
SUBMIT IN TRIPLICATE				7. If Unit or CA, Agreement Designation
Oil X Gas Other				8. Well Name and No.
2. Name of Operator				-PITCHFORK "4" 2
BURLINGTON RESOURCES OIL & GAS COMPANY				9. API Well No.
P. 0. BOX 51810, MIDLAND, TEXAS         915-688-6906				30-025-30331
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) ALL IN SEC. 4, T25S, R34E				10. Field and Pool, or exploratory Area UNDESIGNATED FAIRVIEW MILLS
UL-K, 1830' FSL & 1980' FWL, SURFACE LOCATION				WOLFCAMP & WILDCAT STRAWN
UL-K, 1721' FSL & 2054' FWL, TOP OF PRODUCTION INTERVAL UL-K, 2205' FSL & 2039' FWL, BOTTOM HOLE LOCATION				11. County or Parish, State
				ILEA NM
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA				
TYPE OF SUBMISSION TYPE OF ACTION				
Notice o	fIntent	Abando	onment	Change of Plans
X Subseque	ant Panort	Recomp	pletion	New Construction
Subsequent Report		Pluggin	-	Non-Routine Fracturing
Final Abandonment Notice		Casing Repair Altering Casing		Water Shut-Off
		X Other	DOWNHOLE COMMINGLED	Conversion to Injection
				Dispose Water     (Note: Report results of multiple completion on Well     Completion or Recompletion Report and Log form.)
THIS SUNDRY WAS COMMINGLING. (O 5-7-98 PERFORATE 5-8-98 PERFORATE STRAWN PE	RDER NUMBER DHC-1774 D FIRST SET OF STRAW D STRAWN & WOLFCAMP F RFORATED INTERVAL:	TH THE OCD-HOBBS DI	ST OFFICE TO SHOW THE E	ACCEPTED FOR RECORD
THIS GAS	N FORMS FOR THE SIDET	13.701'-13.880' M ЮRIZONTAL WELL FROM RACK/HORIZONTAL-DOW	THE EXISTING VERTICAL H	GARY GOURLEY HOLEBLM PREVIOUSLY SUBMITTED ON
14. I hereby certify that the for Signed <u>Alavia</u>	T. Pers		Y REPRESENTATIVE	
(This space for Federal or OHIG Approved by Conditions of approval, if	State office use) NAL SIGKED BY CHERK DISTRICT I SUPERVISC any:	W <u>ILLI</u> A; <b>Gitle</b> DR		Date Date
Title 18 U.S.C. Section 1001, or representations as to any m	, makes it a crime for any person kr atter within its jurisdiction.	owingly and willfully to make to	any department or agency of the United	States any false, fictitious or fraudulent statements
Tit +		* See Instruction on	Reverse Side	
Cu)				CA