

FAX TRANSMITTAL SHEET

Date: 8-6-93
Deliver To: Diana Fairhurst
Telecopier Number: 505-334-6170
Office Code: NM 000
Location: ~~Phoenix~~ Aztec

MEDIA ENTRADA #3
L-14-19-3

From: _____
Office Code: _____
Phone Number: _____

Bureau of Land Management, Albuquerque District Office
433 Montana NE, Albuquerque, NM 87107
Telecopier Number: (505) 761-8911

Operator: Pat Boyle
Number of Pages (including Transmittal Sheet): 3

COMMENTS:

Merrin

RECEIVED
AUG - 6 1993
BLM CON. DIV.
AUG 9



Form 1004-0135
(4-78)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

For purposes of this report, identify the well as either a "Lease Well" or a "Well" and use APPROPRIATE FOR the RMT for such purposes.

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

ARTRON OIL & GAS CORPORATION

3. Address and Telephone No.

P.O. Box 340, Farmington, New Mexico 87401 (505) 327-9801

4. Well Location (County, Range, Section, Township, and Range)

1980' FSL & 330' FWL
Section 14, T19N, R3W

FORM APPROVED

Bureau Form No. 1004-0135

Expires March 31, 1983

5. Lease Designation and Serial No.

NM-12012

6. Well Name and No.

7. If Unit or CA Agreement Designation

8. Well Name and No.

Media Entrada Unit No. 3

9. API Well No.

30-043-20078

10. Name of Field or Lease

Media Entrada

11. County or Parish, State

Sandoval, New Mexico

12. TYPE OF ACTION, TYPE OF SUBMISSION, AND TYPE OF NOTICE (SEE INSTRUCTIONS ON REVERSE SIDE)

TYPE OF SUBMISSION

TYPE OF ACTION

☒ New Construction

☐ Abandonment

☐ Change of Plans

☐ Re-completion

☐ New Construction

☐ Plugging Back

☐ Non-Routine Fracturing

☐ Casing Repair

☐ Water Shut Off

☐ Artisan Drilling

☐ Conversion to Other Use

☐ Other

☒ Dispose Water

Other (Specify in Remarks)

Completion or Re-completion Report and Log

Other (Specify in Remarks)

13. Remarks (This space is for additional information, including a description of the well, the operator's name, the well's location, and the well's status. It is also the place to indicate any changes to the well's status or location.)

14. Signature of Operator (This space is for the signature of the operator, who is responsible for the well's operation and maintenance.)

15. Signature of BLM Representative (This space is for the signature of the BLM representative, who is responsible for the well's regulation and enforcement.)

Steven S. Dunn

Operations Manager

3/30/93

Signature of BLM Representative

See instruction on Reverse Side

FILE



The Western Company of North America

3250 South Side River Road
Farmington, New Mexico 87401
Phone (505)327-6222
Fax (505)327-5766

API WATER ANALYSIS

Sample No. 1011992 Date Sampled 11/11/92
Location _____ State _____
City _____ County _____
Well No. _____ Depth _____ Formation _____
Water Type _____ Sampled By _____

DISSOLVED SOLIDS

CATIONS

	mg/l	me/l
Calcium Ca	<u>18550</u>	<u>523</u>
Magnesium Mg	<u>1217</u>	<u>35</u>
Sulfate SO ₄	<u>1000</u>	<u>20</u>
Other Cations	<u>_____</u>	<u>_____</u>

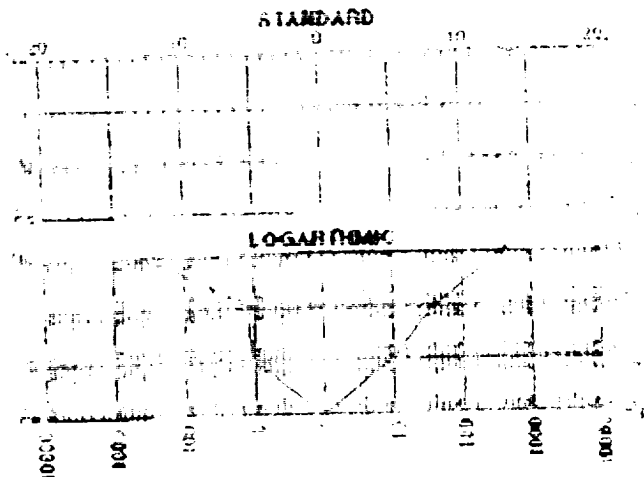
ANIONS

Chloride Cl	<u>18550</u>	<u>523</u>
Sulfate SO ₄	<u>1217</u>	<u>35</u>
Carbonate CO ₃	<u>1000</u>	<u>20</u>
Other Anions	<u>_____</u>	<u>_____</u>

OTHER PROPERTIES

pH 7.43
Specific Gravity 60/60 F 1.0
Dissolved Solids (mg/l) 34587
Total Hardness 34587

WATER PATTERNS-me/l



Analyst _____

Please refer any questions to
Person District Engineer
Thank you



BRUCE KING
GOVERNOR

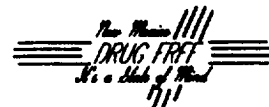
STATE OF NEW MEXICO

ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION
AZTEC DISTRICT OFFICE

ANITA LOCKWOOD
CABINET SECRETARY

1000 RIO BRAZOS ROAD
AZTEC, NEW MEXICO 87410
(505) 334-6178



FAX TRANSMITTAL SHEET

DATE: 8-6-93

TO: PAT HESTER

BLM

761-8911

FROM: DIANNA FAIRHURST

FAX: 505-334-6170

COMMENTS: WE'VE APPROVED PREVIOUS GUNDRIES
FOR MERRION - THERE ARE NO PROBLEMS WITH THE
NMOCD ON THIS ONE. THANKS FOR LETTING US
LOOK AT IT.

NUMBER OF PAGES INCLUDING COVER: 1