## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

| REDÉ<br>BL                    | IVEI<br>M | D  |    |
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| SUNL   | DRY NOTICES AND REP       |   |                                |  |  |
|--|---------------------------|---|--------------------------------|--|--|
|  |                           | 5. LEASE NUMBER                           | <del>1710 11</del> 13101611.M. |  |  |
|  |                           | JIC CONT #1                               | 126                            |  |  |
| 1. TYPE OF WELL<br>••••• ⊙≠∠   |                           | 6. IF INDIAN, ALL                         | OR TRIBE NAME                  |  |  |
| -312 OF C  |                           | JICARILLA APACH                           | E TRIBE                        |  |  |
| 2. OPERATOR  |                           | 7. UNIT AGREEMENT                         | r name                         |  |  |
| MERIDIAN OIL IN  | IC.                       |   |                                |  |  |
| 3. ADDRESS & PHONE NO  | O. OF OPERATOR            | 8. FARM OR LEASE                          | NAME                           |  |  |
| P O BOX 4289   |                           | JICARILLA 126 S<br>9. WELL NO.            |                                |  |  |
| FARMINGTON, N  | ARMINGTON, NM 87499       |   |                                |  |  |
|  |                           | 15  |                                |  |  |
| 4. LOCATION OF WELL  |                           | 10. FIELD, POOL, OR WILDCAT               |                                |  |  |
| 790'FNL 790'FE   | Ĺ                         | W.LIND/GALLUP DK 11. SEC. T. R. M OR BLK. |                                |  |  |
|  |                           |   | 4N RO4W NMPM                   |  |  |
|  |                           | 200000000000000000000000000000000000000   | O CONTROL                      |  |  |
| 14. PERMIT NO.   | L5. ELEVATIONS<br>6830'GL | 12. COUNTY 1                              | 3. STATE NM                    |  |  |
| 1  | 0030 GD                   | KIO IMMIDII                               |                                |  |  |
| 16. SUBSEQUENT REPORT  | OF:                       |   |                                |  |  |
| 17. Describe proposed of   | or completed operat       | ions                                      |                                |  |  |
| 17. Describe proposed of   | or compresed operat       | _   |                                |  |  |
| 5/13/91 - MOLRU TOOM T   | /Rods                     | NE I                                      | JE LV                          |  |  |
| 5/14/91 - TOOM W/Tubing  |                           |   | P1 61991                       |  |  |
| 5/16/91 - Attempt to re  | etrieve Packer Plug.      | OIL,                                      | CON. DIV                       |  |  |
| 5/17/91 - Mill on Pack   |                           |   |                                |  |  |
| 5/21/91 - Cut off tubing and leave 2 Joints and mike. in the hole from 7165-7103'. |                           |   |                                |  |  |
| 5/22/91 - TIH w/tubing   | and land at 7092'.        |   |                                |  |  |
| 5/23/91 - Run rods and   | pump and put well on      | production.                               |                                |  |  |
| ALTERING CASING - COMMI  | NGLE GALLUP & DAKOTA      |   |                                |  |  |
|  | $P < \mathcal{A}$         | a   | 14/01                          |  |  |
| 18. AUTHORIZED BY: Q   | Les much ENGINEER         |   | DATE                           |  |  |
|  | PRODUCTION ENGINEER       |   | J.11.11                        |  |  |
| NOTE: THIS FORMAT IS   | ISSUED IN LIEU OF U       | JS BLM FORM 3160-5.                       | EPTED EOB RECORD               |  |  |
| (This space for Federa   | l or State office (       | use)                                      | SEP 12 1991                    |  |  |
| APPROVED BY  | TITLE                     | DA  | TE<br>ARMINGTON RESOURCE AREA  |  |  |
| CONDITION OF APPROVAL,   | IF ANY:                   | '   | 7 7                            |  |  |

NMOCD