

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells - 1 11/12/95

1. Type of Well

GAS

2. Name of Operator

MERIDIAN OIL

3. Address & Phone No. of Operator

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

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

910' FSL, 1665' FWL, Sec. 27, T-25-N, R-7-W, NMPM

5. Lease Number

SF-078878

6. If Indian, All. or

Tribe Name

7. Unit Agreement Name

Canyon Largo Unit

8. Well Name & Number

Canyon Largo U NP #172

9. API Well No.

30-039-20403

10. Field and Pool

Basin Fruitland Coal/
Ballard Pictured Cliffs

11. County and State

Rio Arriba 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 checked="" 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 type="checkbox"/> Other -	

13. Describe Proposed or Completed Operations

11-27-95 MIRU. ND WH. NU BOP. PT BOP. SDON.

11-28-95 Establish circ w/20 bbl wtr down tbg & out csg. Plug #1: pump 35 sx Class "B" cmt @ 1337-2607'. Start to TOO. Tbg stuck. Tried to circ cmt out of csg. Could not free tbg. WOC. TIH w/1 1/4" tbg cutter. Tag cmt @ 1562'. Cut tbg @ 1535'. TOO. w/47 jts 1 1/4" tbg. SDON.

11-29-95 PT csg to 500 psi/5 min, OK. Perf 2 sqz holes @ 318'. Establish circ down csg & out bradenhead w/18.5 bbl wtr. Plug #2: pump 107 sx Class "B" cmt down csg & out bradenhead. Circ 1 bbl cmt to surface. ND BOP. Cut off WH. Install dry hole marker w/10 sx Class "B" cmt. RD. Rig released. Well plugged and abandoned 11-29-95.

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

Signed [Signature] Title Regulatory Administrator Date 11/30/95

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

APPROVED

DEC 11 1995

DISTRICT MANAGER

NMOCD