

submitted in lieu of Form 3160-5

UNITED STATES RECEIVED
DEPARTMENT OF THE INTERIOR BLM
BUREAU OF LAND MANAGEMENT

94 AUG 24 PM 2:41
Sundry Notices and Reports on Wells

070 FARMINGTON, NM

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

1273'FNL, 1328'FWL, Sec.4, T-25-N, R-8-W, NMPM

5. Lease Number
NM-04226

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
McManus #2

9. API Well No.
30-045-05663

10. Field and Pool
Ballard Pictured Cls

11. County and State
San Juan 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

8-18-94 MIRU. ND WH. NU BOP. PT BOP, OK. TOO H w/1" tbq. Ran gauge ring to 2040'.
POOH w/gauge ring. RD. TIH w/5 1/2" cmt retainer, set @ 2014'. SDON.
8-19-94 Plug #1: pump 64 sx Class "B" cmt below retainer. Load hole w/mud, PT csg
to 700 psi, OK. Spot 35 sx Class "B" cmt on top of retainer to 1705'.
TOOH to 1416'. TIH, Shot 4 holes @ 1471'. Set retainer @ 1416'. Could
not establish rate below retainer. PT to 1000 psi, OK. Plug #2: spot
111 sx Class "B" cmt on top of retainer to 1186'. TOO H. TIH, shot 2 holes
@ 148'. TOO H. Plug #3: pump 55 sx Class "B" cmt down csg, good cmt out
bradenhead. WOC. ND BOP. Cut off WH. Install dry hole marker. RD. Plugged
& abandoned well 8-19-94.

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

Signed [Signature] Title Regulatory Affairs Date 8/24/94

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

APPROVED

94 AUG 24 1994
[Signature]
DISTRICT MANAGER