

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well GAS	5. Lease Number SF-079709 079787 6. If Indian, All. or Tribe Name 7. Unit Agreement Name Huerfano Unit
2. Name of Operator Meridian Oil Inc.	8. Well Name & Number Huerfano Unit #221E
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700	9. API Well No.
4. Location of Well, Footage, Sec., T, R, M 1090'FSL, 1580'FEL Sec.13, T-25-N, R-10W, NMPM	10. Field and Pool Basin Dakota 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 checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Pack	<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

This well may have a casing failure. It is intended to pull the tubing, pick up an isolation packer, TIH, and set the pkr at approximately 6000'.

The well will be swabbed and returned to production.

**RECEIVED**

JAN 28 1993

OIL CON. 2  
DIST. 3

THIS APPROVAL EXPIRES MAY 15 1993

OIL CON. 2, NM

JAN 14 PM 2:34

RECEIVED  
BLM

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

Signed [Signature] (MP) Title Regulatory Affairs Date 1/13/93

(This space for Federal or State Office use)

APPROVED BY \_\_\_\_\_ Title \_\_\_\_\_ Date **APPROVED**

CONDITION OF APPROVAL, if any:

JAN 22 1993

AREA MANAGER

NMOC