

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

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
990' FSL, 990' FWL, Sec. 23, T-27-N, R-3-W, NMPM

5. Lease Number
Jic Contract 94
6. If Indian, All. or
Tribe Name
Jicarilla Apache
7. Unit Agreement Name

8. Well Name & Number
Jicarilla 94 #5
9. API Well No.
30-039-06968
10. Field and Pool
Gavilan Pictured Cliffs/
Blanco Mesaverde
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
☐ Notice of Intent	☐ Abandonment
☒ Subsequent Report	☐ Recompletion
☐ Final Abandonment	☐ Plugging Back
	☐ Casing Repair
	☐ Altering Casing
	☒ Other - Pay add & commingle
	☐ Change of Plans
	☐ New Construction
	☐ Non-Routine Fracturing
	☐ Water Shut off
	☐ Conversion to Injection

13. Describe Proposed or Completed Operations

6-2-95 MIRU.
6-3-95 ND WH. NU BOP. Attempt to POOH w/Pictured Cliffs tbg.
6-4-95 TOOH w/124 jts 2 3/8" tbg. Release seal assembly on Model "D" pkr. TOOH w/180 jts 2 3/8" tbg. TIH w/pkr picker & mill. Ran csg scraper to 4040'. TOOH.
6-5-95 TIH w/7 5/8" RBP, set @ 3880'. TIH w/FB pkr, set @ 3854'. PT RBP to 3000 psi, OK. RU, ran CET-CCL-GR @ 270-3880, TOC @ 1000'. TIH w/retrieving head, latch RBP @ 3880', TOOH. TIH w/RBP, set @ 4000'. TIH w/FB pkr, set @ 3891'. PT RBP to 3000 psi, OK. TOOH w/pkr.
6-6-95 RU, dump 2 sx sd on RBP. Perf Pictured Cliffs w/2 SPF @ 3874-3930' w/88 holes total. RD. Acidize w/1750 gal 15% Hcl. Frac Pictured Cliffs w/130,000# 20/40 Brady sd, 335 bbl 20# linear gel, 640,000 SCF N2. RU, set 7 5/8" RBP @ 3880'. Dump 2 sx sd on RBP. Perf upper Pictured Cliffs w/2 SPF @ 3750-3754, 3762-3770, 3796-3824 w/80 holes total. Prepare to frac.
6-7-95 Frac upper Pictured Cliffs w/87,000# 20/40 Brady sd, 278 bbl 20# linear gel, 275,000 SCF N2. CO after frac.

Continued on back

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

Signed [Signature] Title Regulatory Affairs Date 6/12/95

(This space for Federal or State Office use)
APPROVED BY [Signature] Title Chief, Lands and Mineral Resources Date JUN 26 1995

CONDITION OF APPROVAL, if any:

6-8-95 CO after frac. TIH w/retrieving head. Blow well & CO.
6-9-95 Latch RBP @ 3880'. TOOH w/RBP. TIH, blo well & CO.
6-10-95 Blow well & CO. Latch RBP @ 4000'. TOOH. TIH, tag fill @ 6150'. CO @
6150-6185'. Drill junk iron. TOOH. RU, ran after frac log. TIH w/mill.
Mill on junk @ 6192-6255'.
6-11-95 Blow well & CO. TOOH w/mill. TIH w/200 jts 2 3/8" 4.7# J-55 tbgs, landed @
6165'. ND BOP. NU WH. RD. Rig released.

CMD :
OG6WCMP

ONGARD
C104-AUTHORIZATION TO TRANSPORT

07/13/95 08:02:40
OGODJ -EME5

OGRID Idn : 14538 API Well No : 30 ~~39~~ 6968 Pool Code : 72319 *mv*
Operator Name : MERIDIAN OIL INC
Prop Name : JICARILLA 94 Well No : 905
B.H. Location: UL : M Sec : 23 Twp : 27N Range : 03W Lot Idn :
Prod Method (F/P) : F C104 Aprvl Dte : Gas Conn Dte :
NFO Permit No : NFO Eff Dte : NFO Exp Date :
Remove POD from WC: N Remove Transporter from POD : N
Sel:

used
Transporter Idn : 14538 Name : MERIDIAN OIL INC
Point of Disp : 1306610 Transporter type (G/O/W): O Eff Dte : 01/01/1940
Transporter Idn : 25244 Name : WILLIAMS FIELD SERVICES CO.
Point of Disp : 1306630 Transporter type (G/O/W): G Eff Dte : 01/01/1940
Transporter Idn : Name :
Point of Disp : 1306650 Transporter type (G/O/W): Eff Dte :
Production Test : First Oil Prod Dte : 01-01-1900 Gas Dlv Date: 01-01-1900
Test Date : Tubing Pressure : Choke Size :
Oil(BOPD) : Gas(MCFD) : Water(BPD) :
AOF(MCFD) :

E0005: Enter data to modify or PF keys to scroll

PF01 HELP
PF07

PF02
PF08

PF03 EXIT
PF09 PRINT

PF04 GoTo
PF10

PF05
PF11

PF06 CONFIRM
PF12 NEX

*Deleted PC pods & gave 1 Set of pods
well has been changed*

5 NMCD 1 file 4 BLM

RECEIVED
P.O. Box 2088, Santa Fe, NM 87504-2088
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RECEIVED
JUL - 3 1995
OIL CON. DIV.

State of New Mexico
Burg, Morris & Natural Resources Department
P.O. Box 2088
Santa Fe, New Mexico 87504-2088
Form C-136
Original 12/23/91
Approved and 4 copies to the
appropriate district office
DIST. 3

APPLICATION FOR APPROVAL TO USE AN ALTERNATE GAS MEASUREMENT METHOD

Operator Name: Dugan Production Corp.
Operator No. _____
Operator Address: P.O. Box 420, Farmington, NM 87499
Lease Name: April Surprise # 4
Type: State _____ Federal ☒ Fee NM 4958
Location: Unit 1, Sec. 19, T44N, R 9W
Pool: Basin Dakota
Requested Effective Time Period: Beginning upon approval (approx. 8-1-95)
Ending indefinite

APPROVAL PROCEDURE: RULE 403.B.(1)
Please attach a separate sheet with the following information:
1) A list of the wells (including well name, number, ULSTR location, and API No.) included in this application.
2) A one year production history of each well included in this application (showing the annual and daily volumes).
3) The established or agreed-upon daily producing rate for each well and the effective time period.
4) Designate wells to be equipped with a flow device (required for wells capable of producing 5 MCF per day or more).
5) The gas transporter(s) connected to each well.

APPROVAL PROCEDURE: RULE 403.B.(2)
Please attach a separate sheet with the following information:
A separate application is required for each Central Pulse Delivery (CPD).
Working interest, royalty and overriding royalty ownership must be common for all wells to be connected to the subject CPD.
1) An ownership plat showing a description of the lease and all of the wells to be produced through this CPD.
a) List the wells which will be metered separately, including API No.
b) List the wells which will not be metered separately, including API No.
2) Describe the proposed method of allocating production from non-metered wells.
3) A one year production history of the wells which will not be metered showing the annual and daily volumes.
4) The gas transporter(s) connected to this CPD.

Applicant will be responsible for filing OCD Form C-111 for the CPD.

OPERATOR
I hereby certify that the rules and regulations of the Oil Conservation
Division have been complied with and that the information given above is
true and complete to the best of my knowledge and belief.

Signature: *John L. Jacobs*
Printed Name & Title: John L. Jacobs, V.P.

OIL CONSERVATION DIVISION
This approval may be canceled at anytime that operating conditions
indicate that re-tests may be necessary to prevent waste and protect
correlative rights.
Further Notice
Approved Unit: _____
By: ORIGINAL SIGNED BY ERNIE BUSCH
Title: DEPUTY OIL & GAS INSPECTOR, DIST. #3