

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
1650' FSL, 1550' FWL, Sec. 7, T-27-N, R-5-W, NMPM

5. Lease Number
SF-079391
6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

San Juan 27-5 Unit
8. Well Name & Number
San Juan 27-5 U #126
9. API Well No.
30-039-20400
10. Field and Pool
Basin Dakota
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 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 checked="" type="checkbox"/> Other - Tubing repair	

13. Describe Proposed or Completed Operations

3-27-96 MIRU. ND WH. NU BOP. TOO H w/142 jts 1 1/2" tbg. Tbg parted. TIH, latch tbg, TOO H. SDON.
3-28-96 TIH w/fishing tools. Latch fish @ 4582'. TOO H w/5 jts 1 1/2" tbg. SDON.
3-29-96 TIH, latch fish. Tbg shows free to 7702'. TOO H. TIH w/chemical cutter to 7683'. Attempt to cut tbg. TOO H w/chemical cutter, stuck. TOO H w/2 3/8" tbg, fishing tools & 92 jts 1 1/2" tbg. SD for weekend.
4-1-96 TIH w/4 1/2" csg scraper to 7479'. TOO H. TIH w/sand bailer to PBTD @ 7762'. TOO H. SDON.
4-2-96 TIH w/246 jts 2 3/8" 4.7# J-55 tbg & 4" pkr, set pkr @ 7416' w/8 jts tbg below pkr & 238 jts above. PT csg to 1100 psi, failed. PT csg to 1000 psi, failed. ND BOP. NU WH. RD. Rig released.

A procedure to repair casing will be submitted.

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

Signed *Reggie S. Shadwell* Title Regulatory Administrator Date 4/3/96

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

CONDITION OF APPROVAL, if any:

Date

ACCEPTED FOR RECORD

APR 10 1996

FARMINGTON DISTRICT OFFICE
BY *NT*

NMCO