UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

| Sundry Not: | ices and Reports on Well | s | | |
|--|-----------------------------|--|---|----------|
| | | 5. | Lease Number | • |
| 1. Type of Well GAS | | 6. | 6. If Indian, All. or Tribe Name | |
| | | 7. | Unit Agreeme | ent Name |
| 2. Name of Operator MERIDIAN OIL | | | | |
| MERIDIAN OIL | | San Juan 27-5 Unit 8. Well Name & Number | | |
| 3. Address & Phone No. of Operator | | 8. | San Juan 27-5 U #157 | |
| PO Box 4289, Farmington, NM 87499 (505) 326-9700 | | 9. | | |
| 4. Location of Well, Footage, Sec., T, R, M 1090'FSL, 1600'FEL, Sec.24, T-27-N, R-5-W, NMPM | | 10. | Field and Po | ool |
| , | , , | 11. | County and S Rio Arriba C | State |
| 12. CHECK APPROPRIATE BOX TO INI | TCAME NAMIDE OF NOMICE | DEDODE OFFI | | · |
| Type of Submission | Type of Act | | DATA | |
| _X_ Notice of Intent | _X_ Abandonment | _ Change of Pla | | |
| Cub a constant Dan and | Recompletion | New Construct | | |
| Subsequent Report | Plugging Back Casing Repair | <pre>_ Non-Routine Water Shut or</pre> | | |
| Final Abandonment | Altering Casing | | | |
| | Other - | _ | | |
| 13. Describe Proposed or Compl | leted Operations | | | |
| It is intended to plug and by 5-15-96. | d abandon the subject we | ll. A procedure | e will be sub | mitted |
| | | | y No many services | |
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| | | | | |
| 14. I hereby certify that the | foregoing is true and c | orrect. | | |
| Signed MALL MALL | (ROS9) Title Regulator | y Administrator | Date 3/5/96 | |
| (This space for Federal or State APPROVED BY | e Office use) Title | Date | | |
| CONDITION OF APPROVAL, if any: | | | | |
| | | | | |
| | | V 20 CO 20 | 1 1 2 C 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |

APPROVED

MAR DE 1986

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