

submitted in lieu of Form 3160-5

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

93 OCT 14 PM 3:45

1. Type of Well  
GAS

RECEIVED  
OCT 20 1993

070 FARMINGTON, NM

5. Lease Number  
SF-079392  
6. If Indian, All. or  
Tribe Name

2. Name of Operator  
MERIDIAN OIL

OIL CON. DIV  
DIST. 3

7. Unit Agreement Name

3. Address & Phone No. of Operator

PO Box 4289, Farmington, NM 87499 (505) 326-9700

8. Well Name & Number  
San Juan 27-5 U 187  
9. API Well No.

4. Location of Well, Footage, Sec., T, R, M

1750'FNL, 1620'FWL Sec.19, T-27-N, R-5-W, NMPM

10. Field and Pool  
Blanco Mesa Verde  
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

☐ Change of Plans

☒ Subsequent Report

☐ Recompletion

☐ New Construction

☐ Final Abandonment

☐ Plugging Back

☐ Non-Routine Fracturing

☐ Casing Repair

☐ Water Shut off

☐ Altering Casing

☐ Conversion to Injection

☐ Other -

13. Describe Proposed or Completed Operations

10-12-93 MOL&RU. TIH to 3145'. Stacked out, laid back 2 jts. Spot 30 sx Class "B" cmt 3093-2002'. Pull to 1981'. Tag TOC @ 2172'. Spot 23 sx Class "B" 2152-1319'. Displace w/2 BW. Reverse circ. TOOH w/27 jts tbg.

10-13-93 Perf @ 1290'. Set cmt ret @ 1206'. Pump 34 sx Class "B" cmt outside, 6 sx inside, to 1190'. Pull out of ret. Pump 28 sx Class "B" to 190'. Reverse circ. Pump 9.5 bbl light slurry to locate hole in csg. Located @ 200'. Approved f/W.Townsend given not to perf @ 190'. Pump 89 sx Class "B" cmt to surface, circ 1 bbl out thru bradenhead. ND BOP. Cut off WH. Install dry hole marker. Released rig. Well plugged & abandoned.

Approved as to plugging of the well bore.  
Liability under bond is retained until  
surface restoration is completed.

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

Signed [Signature] Title Regulatory Affairs Date 10/13/93

(This space for Federal or State Office use)

APPROVED BY \_\_\_\_\_ Title \_\_\_\_\_

CONDITION OF APPROVAL, if any: \_\_\_\_\_

APPROVED

Date

OCT 15 1993

DISTRICT MANAGER

NMOCD