UNITED STATES

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

	Notices and Reports on	wells	
		5.	Lease Number SF-078937
1. Type of Well		6.	If Indian, All. or
GAS			Tribe Name
		7.	Unit Agreement Nam
2. Name of Operator MERIDIAN OLL			
		8.	Well Name & Number
3. Address & Phone No. of O	perator		P L Davis #3
	, NM 87499 (505) 326-9°	700 9.	API Well No. 30-045-20547
4. Location of Well, Footage, Sec., T, R, M		10.	Field and Pool
890'FSL, 1830'FEL, Sec.13, T-26-N, R-11-W, NMPM			Basin Dakota
		11.	County and State
			San Juan Co, NM
12. CHECK APPROPRIATE BOX T	O INDICATE NATURE OF NO	TICE REPORT OTHER	DATA
Type of Submission		f Action	
X Notice of Intent		Change of Pla	ans
	Recompletion		
Subsequent Repor	t Plugging Back		
	Casing Repair		
Final Abandonmen		ng Conversion to	o Injection
	Other -		
13. Describe Proposed or	Completed Operations	<u> </u>	
It is intended to plu wellbore diag	g and abandon the subje ram will be submitted by	ct well. A detailed y March 1, 1995.	procedure and
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			1.10.21
14. I hereby certafy that	: the foregoing is true		
14. I hereby certify that Signed May Manual	< 1	and correct.	te 1/23/95
Signed My Stalps	(ROS1)Title Regu	and correct.	te 1/23/95
Signed Man Man (This space for Federal or	(ROS1)Title Regu	and correct.	te 1/23/95
(This space for Federal or APPROVED BY	(ROS1)Title Regu	and correct.	te 1/23/95
(This space for Federal or	(ROS1)Title Regu	and correct. Latory Affairs Da Date	te 1/23/95

FEB 0 1 1995
DISTRICT MANAGER