

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
14538

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, 1650' FWL Sec. 20, T-26-N, R-10-W, NMMPM

5. Lease Number
30-045-21399
SF-080893

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name
Huerfano Unit 7139

8. Well Name & Number
Huerfano Unit #261

9. API Well No.

10. Field and Pool
Basin Dakota 71599

11. County and State
San Juan Co, NM

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

Type of Submission

Type of Action

<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input 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 -	

13. Describe Proposed or Completed Operations

Please change the name of this well to be:

Huerfano Unit #212E

RECEIVED
FEB 11 1994
OIL CON. DIV.
DMS

070 FARMINGTON, NM

54 FEB -7 AM 10:46

RECEIVED
BLM

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

Signed [Signature] (MW) Title Regulatory Affairs **ACCEPTED FOR RECORD**

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

CONDITION OF APPROVAL, if any:

FEB 09 1994

FARMINGTON DISTRICT OFFICE

BY [Signature]