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

5. **Lease Number**
   NM-01365
6. **If Indian, All.or Tribe Name**

7. **Unit Agreement Name**
   Huerfano Unit

2. **Name of Operator**
   Meridian Oil Inc.

8. **Well Name & Number**
   Huerfano Unit #175E

3. **Address & Phone No. of Operator**
   Box 4289, Farmington,NM 87499 (505)326-9700

9. **API Well No.**

4. **Location of Well, Footage,Sec,T,R,M.**
   790'N, 1650'E Sec.14, T-26-N, R-10-W, NMPM

10. **Field and Pool**
    Basin Dakota
11. **County and State**
    San Juan County, 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
	__ Recompletion	__ New Construction
X Subsequent Report	__ Plugging Back	__ Non-Routine Fracturing
	X Casing Repair	__ Water Shut Off
__ Final Abandonment	__ Altering Casing	__ Conversion to Injection
	__ Other	

13. **Describe Proposed or Completed Operations**

12-3-91 MOL&RU. Kill w/2% KCl. ND WH. NU BOP.
12-4-91 TOOH w/pkr. RIH w/scraper to 6862'. TOOH. Set RBP @ 3900'. PT 1000#. Pull pkr to 3439'. PT annulus 1250#, ok. SDFN.
12-05-91 Isolate hole 3472-3568'. Move BP to 6600'. PT csg 3568-6600' @ 1250#, ok. TOOH w/pkr. TIH open ended to 3600'. Spot 100 sx cmt plug 3600-3172'. Pull to 3275'. Displ tbg w/11 BW. Pull to 2625'. Reverse out squeeze hole. PT 1000#. SI.
12-06-91 TOOH w/tbg. TIH w/scraper, tag cmt @ 3185'. Drl cmt 3185-3409'.
12-07-91 Drl cmt 3409-3600'. PT, leak off. TOOH. TIH w/FBP, isolate same hole 3472-3568'. TOOH w/pkr. Spot 20 sx Class "B" neat plug 3350-3600'. TOOH. TIH w/FBP.
12-08-91 Release pkr. TIH w/scraper, tag cmt @ 3415'. Drl cmt 3415-3600'. PT csg 1000#/15 min, ok. TOOH. TIH w/retrieving head.
12-09-91 Ran 208 jts 2 3/8", 4.7#, J-55 EUE 8rd tbg landed @ 6742'. SN @ 6709'. Packer @ 4463'. ND BOP. NU WH. Swabbed.
12-10-91 Swabbed. SI. Released rig.

14. I hereby certify that the foregoing is true and correct
Signed Peggy Bradfield Title Regulatory Affairs Date 12-11-91

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITION OF APPROVAL, IF ANY:

SMM