

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

3. Address & Phone No. of Operator

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

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

1490'FSL, 1600'FWL, Sec.29, T-26-N, R-10-W, NMPM

5. Lease Number

SF-078002

6. If Indian, All. or

Tribe Name

7. Unit Agreement Name

Huerfano Unit

8. Well Name & Number

Huerfano Unit #219E

9. API Well No.

30-045-26678

10. Field and Pool

Basin Dakota

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

☐ 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

1-17-95 MIRU. ND WH. NU BOP. Plug #1: pump 44 sx Class "B" cmt inside csg @ 5937-6554'.
POOH to 4690'. SI. WOC. SDON.

1-18-95 TIH, tag cmt @ 6002'. POOH to 5970'. Load well w/wtr. PT csg to 500 psi, OK.
POOH to 5481'. Plug #2: pump 13 sx Class "B" cmt inside csg @ 5309-5481'.
POOH to 3462'. Plug #3: pump 12 sx Class "B" cmt inside csg @ 3303-3462'.
POOH to 1926'. Plug #4: pump 25 sx Class "B" cmt inside csg @ 1596-1926'.
POOH to 1152'. Plug #5: pump 31 sx Class "B" cmt inside csg @ 743-1152'. POOH
to 282'. Establish circ out bradenhead. Plug #6: pump 16 sx Class "B" cmt
down csg and out 4 1/2" csg. Circ 1/2 bbl cmt out 4 1/2" csg. ND BOP. Cut off
WH. Cmt down 20' between 5 1/2" and 8 5/8" annulus and down 30' inside 4 1/2"
csg. Fill csg and annulus w/5 sx Class "B" cmt. Install dry hole marker w/20
sx Class "B" cmt. RD. Well plugged and abandoned 1-18-95.

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

Signed [Signature] Title Regulatory Affairs Date 1/25/95

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

APPROVED

NMOCD

FEB 01 1995
DISTRICT MANAGER