

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
SEP 13 1994

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
855'FSL, 1180'FWL, Sec.13, T-26-N, R-9-W, NMPM

Lease Number
NM-09840
6. If Indian, All. or
Tribe Name
7. Unit Agreement Name
8. Well Name & Number
Tibbar Federal #1E
9. API Well No.
30-045-29141
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
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other -

13. Describe Proposed or Completed Operations

9-6-94 Drill to TD @ 6720'. Ran logs.
9-7-94 Ran 155 jts 4 1/2" 11.6# N-80 8RD LTC csg, set @ 6720'. Cmtd first stage w/419
sx Class "B" 65/35 poz w/6% gel, 0.25 pps Cellophane (741 cu.ft.). Tailed
w/100 sx Class "B" cmt w/0.6% CF-14 fluid loss (118 cu.ft.). Stage tool @
4684'. Circ 21 bbl cmt to surface. Cmtd second stage w/634 sx Class "B"
65/35 poz w/6% gel, 2% calcium chloride, 0.25 pps Celloseal (1122 cu.ft.).
Tailed w/100 sx Class "B" cmt w/1% calcium chloride (118 cu.ft.). Stage tool
@ 1657'. Circ 30 bbl cmt to surface. Cmtd third stage w/216 sx Class "B"
65/35 poz w/6% gel, 2% calcium chloride, 0.25 pps Celloseal (382 cu.ft.).
Tailed w/100 sx Class "B" cmt w/2% calcium chloride (118 cu.ft.). Circ 40 bbl
cmt to surface. WOC. PT csg to 3800 pis/15 min, OK. ND BOP. NU WH. Set slips
50,000 psi. RD. Rig released.

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

Signed [Signature] Title Regulatory Affairs Date 9/8/94

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

CONDITION OF APPROVAL, if any:

Date
ACCEPTED FOR RECORD

SEP 14 1994

FARMINGTON DISTRICT OFFICE

RV

NMOOD