

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells 13 11/2/23

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
790'FSL, 1170'FWL, Sec.21, T-26-N, R-9-W, NMPM

Lease Number
SF-078060A
6. If Indian, All. or
Tribe Name
7. Unit Agreement Name
Huerfano Unit
8. Well Name & Number
Huerfano Unit #136F
9. API Well No.
30-045-29196
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 type="checkbox"/> Change of Plans
<input checked="" 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

12-10-94 Drill to TD @ 6727'. Log well.
12-11-94 Ran 158 jts 4 1/2" 11.6# N-80 8RD csg, set @ 6725'. Cmdt first stage w/414 sx Class "G" 65/35 poz w/6% gel, 0.25 pps Cellophane (733 cu.ft.). Tailed w/100 sx Class "G" neat cmt (115 cu.ft.). Stage tool @ 4676'. Circ 24 bbl cmt to surface. WOC. Cmdt second stage w/635 sx Class "G" 65/35 poz, w/2% calcium chloride, 6% gel, 0.25 Cellophane (1124 cu.ft.). Tailed w/100 sx Class "G" neat cmt (115 cu.ft.). Stage tool @ 1622'. Circ 28 bbl cmt to surface. WOC. Cmdt third stage w/358 sx Class "G" 65/35 poz w/6% gel, 2% calcium chloride, 0.25 pps Cellophane (634 cu.ft.). Tailed w/100 sx Class "G" cmt w/2% calcium chloride (115 cu.ft.). Circ 35 bbl cmt to surface. PT to 3800 psi, OK. ND BOP. NU WH. RD. Rig released.

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

Signed *Peggy Shadwick* Title Regulatory Affairs Date 12/12/94

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

DEC 16 1994

NMOCB

FARMINGTON DISTRICT OFFICE
BY *Sm*