

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

070 JAN 25 1996

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
1305' FNL, 1815' FEL, Sec. 7, T-26-N, R-8-W, NMPM

5. Lease Number
SF-078384
6. If Indian, All. or
Tribe Name
7. Unit Agreement Name
8. Well Name & Number
Newsom B #500
9. API Well No.
30-045-29301
10. Field and Pool
Basin Fruitland Coal
11. County and State
San Juan Co, NM

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

Type of Submission

☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment

Type of Action

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☒ Altering Casing
☐ Other -
☒ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut off
☐ Conversion to Injection

13. Describe Proposed or Completed Operations

It is intended to alter the approved surface casing depth and cement of the subject well. The new surface casing depth will be a minimum of 120'.

Revisions:

Mud Program:

Interval	Type	Weight	Fluid Loss
0-120'	Spud	8.4-8.9	No control

Casing Program:

Hole Size	Depth Interval	Casing Size	Weight	Grade
12 1/4"	0-120'	8 5/8"	24#	K-55

Cementing Program:

8 5/8" surface casing - 126 sx Class "B" cement with 0.25 ps Flocele and 2% calcium chloride (148.6 cu.ft. of slurry, 200% excess to circulate to surface). WOC 12 hours. Test casing to 600 psi/30 minutes.

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

Signed [Signature] (KAS1) Title Regulatory Administrator Date 1/24/96

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

CONDITION OF APPROVAL, if any:

Date

APPROVED

JAN 28 1996

DISTRICT MANAGER

NMDCD