

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
1780' FNL, 2180' FEL, Sec. 13, T-26-N, R-9-W, NMPM

NSL-3609

5. Lease Number
NM-09840
If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
McConnell #500

9. API Well No.
30-045-29341

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

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 - Spud & production casing | |

13. Describe Proposed or Completed Operations

4-3-96 MIRU. Spud well @ 9:00 p.m. 4-3-96. Drill to 145'. Circ hole clean. TOOH. TIH w/3 jts 8 5/8" 24# K-55 ST&C csg, set @ 134'. Cmdt w/136 sx Class "G" neat cmt w/3% calcium chloride, 0.25 pps Cellophane (156 cu.ft.). Circ 4 bbl cmt to surface. WOC. NU BOP. PT csg & BOP to 600 psi/30 min, OK.

4-4-96 WOC. Drilling ahead.

4-5-96 Drill to TD @ 2250'. Circ hole clean. TOOH. TIH, log well. TOOH. TIH w/53 jts 4 1/2" 11.6# K-55 LT&C csg, set @ 2244'. Cmdt w/398 sx Class "G" 65/35 poz w/6% gel, 2% calcium chloride, 0.25 pps Cellophane, 5 pps Gilsonite (736 cu.ft.). Tailed w/190 sx Class "G" neat cmt w/2% calcium chloride, 0.25 pps Cellophane (285 cu.ft.). Circ 12 bbl cmt to surface. WOC. PT csg to 3800 psi/15 min, OK. ND BOP. NU WH. RD. Rig released.

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

Signed *[Signature]* Title Regulatory Administrator Date 4/8/96

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

APR 10 1996

FARMINGTON DISTRICT OFFICE

BY *[Signature]*