

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

930' FSL, 1300' FWL, Sec. 24, T-26-N, R-9-W, NMPM

5. Lease Number

NM-09840

6. If Indian, All. or Tribe Name

7. Unit Agreement Name

8. Well Name & Number

McConnell #502

9. API Well No.

30-045-29343

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

☐ 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 - Spud

13. Describe Proposed or Completed Operations

4-8-96 MIRU. Spud well @ 10:45 a.m. 4-8-96. Drill to 139'. Circ hole clean. TOOH. TIH w/3 jts 8 5/8" 24.# K-55 ST&C csg, set @ 134'. Cmdt w/131 sx Class "G" neat cmt w/3% calcium chloride, 0.25 pps Cellophane (151 cu.ft.). Circ 5 bbl cmt to surface. WOC. NU BOP. PT BOP & csg to 600 psi/30 min, OK. Drilling ahead.

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

Signed [Signature] Title Regulatory Administrator Date 4/9/96

(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]

NMOCD

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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 checked="" type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other -
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

4-9-96 Drill to TD @ 2300'. Circ hole clean. TOOH. Circ hole clean.

4-10-96 TIH, log well. TOOH. TIH w/54 jts 4 1/2" 11.6# K-55 LT&C csg, set @ 2292'.
Cmtd w/400 sx Class "G" 65/35 poz w/2% calcium chloride, 6% Bentonite,
0.25 pps Cellophane, 5 pps Gilsonite (740 cu.ft.). Tailed w/100 sx Class
"G" neat cmt w/2% calcium chloride, 0.25 pps Cellophane (115 cu.ft.).
Circ 11 bbl cmt to surface. PT csg to 3800 psi/15 min, OK. ND BOP. NU WH.
RD. Rig released.

RECEIVED
APR 19 1996
OIL CON. DIV.
DIST. 3

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

Signed *Reggie Stoddard* Title Regulatory Administrator Date 4/15/96

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____
CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

APR 17 1996

NMOCD

FARMINGTON DISTRICT OFFICE
BY *343*