

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED

## 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  
1790'FSL, 1640'FWL Sec.16, T-28-N, R-5-W, NMPM

5. Lease Number  
SF-080516

6. If Indian, All. or  
Tribe Name

7. Unit Agreement Name

8. Well Name & Number  
San Juan 28-5 Unit

9. API Well No.  
30-039-25363

10. Field and Pool  
Tapacito PC Ext/  
Basin Ft Coal

11. County and State  
Rio Arriba 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 Injunctio☐ Other -

## 13. Describe Proposed or Completed Operations

The cement design on this well is changed from a two-stage production job to a foamed cement job. It is planned to complete this well rigless; therefore, no stage tools can be used. The tail slurry will be the same as in the original Operations Plan as submitted: 100 sx Class "B" w/2% calcium chloride and 0.25 pps cellophane flakes (15.6 ppg, 1.18 cu.ft./sx, 5.2 gal/sx).

The lead slurry will consist of: Class "B" cmt w/0.035 gal/sx foam stabilizer, 1.5% foaming agent, 2% calcium chloride and 0.25 pps cellophane flakes. This slurry will be foamed using 17,150 SCF of N2 to a 7.5 ppg weight. 350 sx of unfoamed slurry will be used (909 cu.ft. of foamed slurry). This slurry should give a better bond strength than a Pozmix lead slurry.

Meridian Oil, as a prudent operator, recognizes the responsibility to test for cement job success. Any remedial work, if necessary, will be approved through the appropriate regulatory agency.

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

Signed [Signature] Title Regulatory Affairs Date 5/9/94

(This space for Federal or State Office use)

APPROVED BY \_\_\_\_\_ Title \_\_\_\_\_

CONDITION OF APPROVAL, if any:

APPROVED

APR 16 1994

DISTRICT MANAGER

NMOOD