

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

RECEIVED
OCT 11 1994

OIL CON. DIV.
DIST. 3

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'FNL, 890'FWL, Sec.27, T-27-N, R-10-W, NMPM

5. Lease Number
SF-077951A
6. If Indian, All. or
Tribe Name
7. Unit Agreement Name
8. Well Name & Number
Rowley D #1
9. API Well No.
30-045-06302
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 checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment <input type="checkbox"/> Change of Plans
<input 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

It is intended to install pressure monitoring equipment in this well for six months to obtain reservoir characterization data. After the test the wellbore will be returned to its current configuration.

070 PM SEP 30 1994

54 OCT -3 PM 7:31

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

Signed [Signature] (KAS2) Title Regulatory Affairs Date 9/30/94

(This space for Federal or State Office use)
APPROVED BY _____ Title _____ Date _____
CONDITION OF APPROVAL, if any:

APPROVED

OCT 03 1994

DISTRICT MANAGER

