

submitted in lieu of Form 3160-5

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well  
GAS

RECEIVED  
JUN - 6 1994

2. Name of Operator  
MERIDIAN OIL

OIL CON. DIV.  
DIST. 3

3. Address & Phone No. of Operator  
PO Box 4289, Farmington, NM 87499 (505) 326-9700

4. Location of Well, Footage, Sec., T, R, M  
990'FSL, 1650'FEL Sec.11, T-27-N, R-10-W, NMPM

- 5. Lease Number  
SF-077329
- 6. If Indian, All. or Tribe Name
- 7. Unit Agreement Name
- 8. Well Name & Number  
C. M. Morris #3
- 9. API Well No.  
30-045-06526
- 10. Field and Pool  
Fulcher Kutz PC
- 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"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" 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 Injectio

13. Describe Proposed or Completed Operations

This sundry notice is additional information for the sundry submitted 03-25-94. We are currently evaluating options to reduce line pressures in negotiations with the pipeline gatherers, individual wellhead compression, and lateral compression. As the well does have integrity, we respectfully request the well remain shut-in in its current condition for one year. Pipeline pressures are at approximately 165 to 185 psi, which are greater than the well can flow into with current bottom hole pressures.

NOTE: Meridian Oil Inc. obtained operatorship of this well effective January 1, 1992 from Mobil.

THIS APPROVAL EXPIRES JUN 01 1995

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

Signed [Signature] (KJ) Title Regulatory Affairs Date 5/10/94

(This space for Federal or State Office use)

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

CONDITION OF APPROVAL, if any:

APPROVED  
JUN 10 1994  
[Signature]