

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT**

**SUBMIT IN TRIPLICATE\***  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> <small>(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)</small>		SF-078935
1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		80 DEC -8 AM 8:07
2. NAME OF OPERATOR Meridian Oil Inc.		8. FARM OR LEASE NAME Thompson C
3. ADDRESS OF OPERATOR Post Office Box 4289, Farmington, NM 87499		9. WELL NO. 3
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1650'S, 990'E		10. FIELD AND POOL, OR WILDCAT W.Kutz Pic.Cliffs
14. PERMIT NO.		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec. 3, T-27-N, R-12-W N.M.P.M.
15. ELEVATIONS (Show whether OF, FT, GR, etc.) 5908'GL		12. COUNTY OR PARISH    13. STATE San Juan    NM

18. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

11-03-88 MOL&RU. ND WH, NU BOP. TOOH w/1 1/4" tbg. SDFN.

11-04-88 TIH w/52 jts. 2 3/8" tbg to 1650'. Circ hole w/80 ppg 50 vis gel mud (38 bbls.), pumped 2 bbls. wtr, then 78 sks (92 cu.ft.) Cl "B" w/2% calcium chloride in 17 bbls. of 15.6 ppg slurry, then 1/2 bbl. wtr., then 2 bbls. 9 ppg 50 vis gel mud. WOC 3 hrs. TIH w/15 jts. 2 3/8" tbg & tag cmt @ 1494'. Pulled up 15', rolled hole w/gel mud, then 2 BW, then 50 sx. Cl "B" w/2% calcium chloride (59 cu.ft.) in 10.5 bbls. 15.6 ppg slurry, then 1/2 bbls. water, then 1 1/2 bbls. gel mud. TOOH w/14' 2 3/8" tbg, reversed out 3.5 bbls. cmt. TOOH w/2 3/8" tbg. WOC 3 hrs. RU wireline, tag cmt top @1184', then shot 2 holes @ 471' and @ 140'. TIH w/5 1/2" cmt. retainer on 9 jts 2 3/8" tbg to 270' & set retainer. PT to 750 psi, then est. inj. rate @ 3 BPM @ 250 psig, then 55 sx (45 cu.ft.) Cl "B" w/2% calcium chloride in 11.5 bbls. of 15.6 ppg slurry, then dispalced tbg w/gel mud. TOOH w/ 2 3/8" tbg & retainer setting tool. SDFN.

11-05-88 Circ hole w/9 ppg 50 vis gel mud, then pumped 90 sx (106 cu.ft.) Cl "B" w/2% calcium chloride in 19 bbls. of 15.6 ppg slurry, broke circ. to surface w/cmt. ND BOP. Cut off WH 4' below ground level per Steve Mason & welded steel plate. RD & backfilled over well csg. Released rig.

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

SIGNED [Signature] TITLE Regulatory Affairs DATE 12-05-88

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: **NMOCG**

\*See Instructions on Reverse Side