Form 3160-5 November 1983) Formerly 9-531)	UNITED STATES DEPARTMENT OF THE INTE		5. LEASE DESIGNATION AND SF-077875	1985 SERIAL NO.	
	DRY NOTICES AND REPORTS orm for proposals to drill or to deepen or plu Use "APPLICATION FOR PERMIT—" for such		6. IF INDIAN, ALLOTTEE OR	TRIBE NAME	
OIL GAS WELL WELL	Хотнев		7. UNIT AGREEMENT NAME		
2. NAME OF OPERATOR			8. FARM OR LEASE NAME		
	Meridian Oil Inc.		Pipkin		
3. ADDRESS OF OPERATOR			9. WELL NO.		
	Post Office Box 4289,	Farmington NM 8749	9 7		
1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)			10. FIELD AND POOL, OR WILDCAT		
At surface	1650's, 990'E	Fulcher Kutz PC			
	2000 27 330 2	11. SEC., T., R., M., OR BLE. SURVEY OR AREA			
			Sec.17,T-2	27-N.R-10	
			N.M.P.M.	,	
14. PERMIT NO	15. ELEVATIONS (Show whether DF, RT, GR, etc.)		12. COUNTY OR PARISH 13	. STATE	
		5975 ' GL	San Juan	им	
13.	Check Appropriate Box To Indicate	Nature of Notice, Report, or (Other Data		
NO	UENT REPORT OF:				
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL		
FRACT'RE TREAT	WOLTIFIE COMPLETE	FRACTURE TREATMENT	ALTERING CASING	a	
SHOOT OR ACIDIZE	ABANDON®	SHOOTING OR ACIDIZING	ABANDON MENT*		
SPAIR WELL	CHANGE PLANS	(Other)			

Please re-approve a recompletion to the Fruitland Coal according to original sundry notice attached dated 2-25-88. Cancellation request dated 12-20-88 should be discarded.

Fig. 8. RIBE 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 sones pertinent to this work.)

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

The Pictured Cliffs will be abandoned by setting a cement retainer at 1746' and squeezing 25 sx (29 cu.ft.) of Class "B" neat cement under retainer. The uphole coal will be recompleted.

	FOR WARREN			1.3	
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			÷	Barana kiri s	
18. I hereby certify that the foregoing is true and correct	•				
SIGNED A STATE OF THE STATE OF	TITLE _	Regulatory	Affairs	_ (CBATE	<u>03-28</u> -89
(This space for Federal or State office use)				0	
APPROVED BY	TITLE		-	DATE	
CONDITIONS OF APPROVAL, IF ANY:				omist	(ella)
		ON ON S		1 July	
*	See Instructi	ons on Reverse Side			

OIL CAS WELL WELL MAME OF OPERATOR ADDRESS OF OPERATOR LOCATION OF WELL Report See also space LT below.	BUREAU OF LAND RY NOTICES AND THE FOR PROPORTION FOR PE OTHER Leridian Oil In	to deepen or plug by	ON WELLS	6. IP INDIA	77875 AF. ALLOTTER OR TRIBE NAME RESMENT NAME		
OIL CAS WELL WELL MAME OF OPERATOR ADDRESS OF OPERATOR LOCATION OF WELL Report See also space LT below.	orese	to deepen or plug bi	ack to a different reservoir	7. UNIT AG	BEAN THEMSES		
ADDRESS OF OPERATOR LOCATION OF WELL Repo	eridian Oil Ir	nc. Administra	28 mm 2:43				
ADDRESS OF OPERATOR D LOCATION OF WELL Report See also space 17 below.)		ıc.		S. PARM OR			
ADDESS OF OPERATOR P LOCATION OF WELL Repo See also apace 17 below.)		lC.					
See also space 17 below.)		 		Pipk			
See also space 17 below.)	ost Office Bo	4289.Farr	mington,NM 8749	99 7	7		
	ort location clearly and in ac	ccordance with any	state requirements.*		AND POOL, OR WILDCAT		
At surface 1650'S, 990'E			11. ABC., T. SURV Sec,	Fulcher Kutz PC 11. SEC. T. B. M. OB BLK. AFD SUBVEY OF AREA Sec. 17, T-27-N, R- NMPM			
4. PERMIT NO.	15. ELEVATION	S (Show whether of.	RT. GR. etc.)		OR PARISE 13. STATE		
		59	75 ' GL	San	Juan NM		
l.	Check Appropriate Bo	x To Indicate N	ature of Natice, Report,	, or Other Data			
MOT	ICE OF INTENTION TO:	:	. 1	THOUSE THEODERS	o r :		
TEST WATER SECT-OFF	PULL OR ALTER	CASING	WATER SECT-OFF		REPAIRING WELL		
FRACTURE TREAT	HULTIPLE COMP	FETE	FRACTURE TREATMENT	<u>X</u>	ALTERING CABING		
SHOOT OR ACIDIZE		,	SHOOTING OR ACIDIZING	a	ASANDONMENT*		
REPAIR WELL OTHERS	CHANGE PLANS	 -	(Other)	results of multiple o	completion on Vall		
	dated August						
,				eng en	The second second		
SIGNED Certify that the	e foregoing is true and corre		gulatory Affai:	rs DATE	12-20-		

*See Instructions on Reverse Side

	UNITED STATES ARTMET OF THE IN- UREAU _AND MANAGE	SUBMIT IN TRIPLICATES (Other instructions on re- MENT	Budget Bure Expires Aug 5. LEASE DESIGNATI SF-077875	au No. 1004-0139	
	NOTICES AND REPOR		G. IF INDIAN, ALLOT	TES OR TRIBE NAME	
	THE STATE OF THE S	. 28. 0.15.23 (2.14.5°)	7. UNIT AGREMENT	NAME	
Meridian Oil Inc.		可服的是是是 自己,是是他们	8. FARM OR LEAGE N	AME	
P.O. Box 4289 Farmington, New Mexico 87499 1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*			9. WBLL NO7 10. FIBLD AND POOL, OR WILDCAT		
10.	50'S, 990'E		Fulcher-Ku	RIE AND	
14. PERMIT NO.	15. ELEVATIONS (Show wheel) 59751DF	er DF, RT, GR, etc.)	Sec. 17, T2 12. COUNTY OF PARIS San Juan	7N, R10W	
16. Chec		te Nature of Natice, Report, or O		iNM	
	INTENTION TO:		INT REPORT OF:		
This well will be rabandoned by setting	recompleted to the Fro ng a cement retainer i	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (Note: Report results of Completion or Recompletion or Accompletion of Recompletions and measured and true vertical distant Coal. The Picture on the 5 1/2" casing @ 17-3 der retainer. The coal	ncluding estimated da depths for all market ed Cliffs wil 46' and squee:	on Well orm.) te of starting any s and sones perti-	
be completed.				-	
Thereby certify that the foregoin		·			
SIGNED SIGNED SIGNED	Is true and correct If I I I I I I I I I I I I I I I I I I	Regulatory Affairs as	DATE	3-25-88	
(This space for Federal or State APPROVED BY CONDITIONS OF APPROVAL, II	TITLE		APPR	OVED	

OPERATOR

*See Instructions on Reverse Side

AUG 3 0 1988 KH