

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
BLM MAIL ROOM

Sundry Notices and Reports on Wells

36 FEB 19 10 AM 8:57

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  
1760' FSL, 1725' FEL, Sec.26, T-27-N, R-10-W, NMPM

5. Lease Number  
SF-077951

6. If Indian, All. or Tribe Name

7. Unit Agreement Name

8. Well Name & Number  
Frost #3R

9. API Well No.  
30-045-23765

10. Field and Pool  
Fulcher Kutz Pict.Cliffs

11. County and State  
San Juan Co, NM

RECEIVED  
FEB 22 1996

OIL CON. DIV.  
DIST. 3

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 checked="" 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 type="checkbox"/> Other -	

13. Describe Proposed or Completed Operations

It is intended to plug and abandon the subject well in the following manner:

Establish injection into Pictured Cliffs perms. Plug #1: pump 20 sx Class "B" cmt w/0.3% fluid loss into Pictured Cliffs perms, pump 5 sx Class "B" cmt w/0.3% fluid loss on top of cmt retainer. TOOH. Perf 2 sqz holes @ 1095'. Establish circ w/20 bbl wtr. Plug #2: pump 500 sx Class "B" cmt w/2% calcium chloride. Circ cmt to surface. ND BOP. Cut off WH. Install dry hole marker. RD.

Verbal approval to plug and abandon the subject well from Steve Mason, BLM on 2-8-96.

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

Signed Steve Mason Title Regulatory Administrator Date 2/12/96

(This space for Federal or State Office use)

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

CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

FEB 13 1996

FARMINGTON DISTRICT OFFICE  
Sm