

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells.

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
800' FSL, 1800' FWL, Sec.13, T-28-N, R-10-W, NMPM

5. Lease Number
SF-079634

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
McClanahan #20

9. API Well No.
30-045-07418

10. Field and Pool
Basin Dakota

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

☐ Notice of Intent	☐ Abandonment	☐ Change of Plans
☒ Subsequent Report	☐ Recompletion	☐ New Construction
☐ Final Abandonment	☐ Plugging Back	☐ Non-Routine Fracturing
	☐ Casing Repair	☐ Water Shut off
	☐ Altering Casing	☐ Conversion to Injection
	☒ Other - Bradenhead repair	

13. Describe Proposed or Completed Operations

2-26-96 MIRU. ND WH. NU BOP. TOOH w/196 jts 2 3/8" tbgs. TIH w/4 1/2" csg scraper to 6200'. TOOH. SDON.

2-27-96 TIH w/RBP, set @ 6100'. Spot 2 sx sd on RBP. TOOH. RU, ran CBL @ 0-2010', TOC @ 1704'. Perf 4 sqz holes @ 790'. TOOH. Pump 85 sx Class "B" cmt w/2% calcium chloride. WOC. SDON.

2-28-96 TIH to TOC @ 625'. Drill through cmt. TOOH. RU, ran CBL @ 300-960', TOC @ 650'. TIH w/FB pkr, set @ 638'. Pump 180 sx Class "B" cmt w/2% calcium chloride. Reverse out. TOOH w/pkr. RU, shot 4 sqz holes @ 610'. RD. Establish circ down csg & out bradenhead. TIH w/pkr, set @ 451'. Pump 325 sx Class "B" cmt w/2% calcium chloride. Circ 1.5 bbl cmt to surface. WOC. SDON.

2-29-96 TIH, tag TOC @ 441'. Drill cmt @ 441-661'. PT sqz to 500 psi, OK. Drill cmt SDON.

3-1-96 Release pkr, TOOH. TIH, redrill cmt @ 485-640'. PT to 500 psi, failed. TOOH. TIH w/FB pkr, set @ 450'. Pressure csg to 500 psi. Establish injection. Pump 7 bbl cmt. No flow back up bradenhead. Release pkr, TOCH. Sqz to 600 psi. WOC. SD for weekend.

Continued on back

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

Signed *Dan Spanned* Title Regulatory Administrator Date 3/8/96

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

MAR 12 1996

FARMINGTON DISTRICT OFFICE
BY *24*

3-4-96 TIH w/retrieving tool. Circ sd off w/2% Kcl wtr. Latch RBP, TOOH. TIH to 6164'.
Blow well & CO. SDON.
3-5/6-96 Blow well & CO.
3-7-96 Blow well & CO. TOOH. TIH w/200 jts 2 3/8" 4.7# J-55 EUE tbg, landed @ 6321'. ND
BOP. NU WH. RD. Rig released.