

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

- | | |
|---|---|
| <p>1. Type of Well
GAS</p> <p>2. Name of Operator
MERIDIAN OIL</p> <p>3. Address & Phone No. of Operator
PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <p>4. Location of Well, Footage, Sec., T, R, M
1175'FNL, 1190'FEL, Sec.31, T-29-N, R-4-W, NMPM</p> | <p>5. Lease Number
SF-079893A</p> <p>6. If Indian, All. or
Tribe Name</p> <p>7. Unit Agreement Name

San Juan 29-4 Unit</p> <p>8. Well Name & Number
San Juan 29-4 U #201</p> <p>9. API Well No.
30-039-25372</p> <p>10. Field and Pool
Gobernador PC Ext/
Basin Fruitland Coal</p> <p>11. County and State
Rio Arriba Co, NM</p> |
|---|---|

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

Type of Submission	Type of Action
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment <input type="checkbox"/> Change of Plans
<input checked="" 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 checked="" type="checkbox"/> Other -

13. Describe Proposed or Completed Operations

7-30-94 RU. Ran CBL-CCL-GR @ 50-4453'. TOC @ surface.

RECEIVED
OCT 17 1994

OIL CON. DIV.
DIST. 8

OCT 11 PM 3:13
OIL CON. DIV.
DIST. 8

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

Signed [Signature] Title Regulatory Affairs Date 10/10/94

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____
CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

OCT 12 1994

FARMINGTON DISTRICT OFFICE
BY Smm