

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well
GAS

RECEIVED
MAR - 7 1996

2. Name of Operator

MERIDIAN OIL

OIL CON. DIV.
DIST. 3

3. Address & Phone No. of Operator

PO Box 4289, Farmington, NM 87499 (505) 326-9700

4. Location of Well, Footage, Sec., T, R, M

1750' FNL, 1150' FWL, Sec. 5, T-29-N, R-8-W, NMPM

5. Lease Number

SF-078487C

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
Sunray #39. API Well No.
30-045-0875410. Field and Pool
Blanco Pictured Cliffs11. 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 -	

13. Describe Proposed or Completed Operations

2-21-96 MIRU. Pump 32 bbl wtr down csg. No flow out bradenhead. Plug #1: pump 31 sx Class "B" cmt into Pictured Cliffs perfs. Displaced to 2000'. Sqz to 300 psi. WOC. SDON.

2-22-96 Load hole w/5 bbl wtr. PT csg to 500 psi, failed. TIH, tag TOC @ 2881'. TOOH. Establish injection, no flow out bradenhead. Plug #2: pump 31 sx Class "B" cmt into Pictured Cliffs perfs. Displace to 2000'. Sqz to 200 psi. WOC. Load hole w/3 bbl wtr. PT csg to 1000 psi, OK. TIH, tag TOC @ 2420'. Perf 4 sqz holes @ 1989'. TOOH. Establish injection. Plug #3: pump 140 sx Class "B" cmt @ 1725-1989'. Displaced to 1675'. Sqz to 500 psi. WOC. SDON.

2-26-96 TIH, tag TOC @ 1550'. Perf 2 sqz holes @ 592'. Establish injection. Plug #4: pump 55 sx Class "B" cmt w/2% calcium chloride @ 492-592'. Displace to 410'. Sqz to 800 psi. WOC. TIH, tag TOC @ 408'. Perf 2 sqz holes @ 156'. TOOH. Establish circ down csg & out bradenhead w/10 bbl wtr. Plug #5: pump 60 sx Class "B" cmt down csg & out bradenhead. Circ 1 bbl cmt to surface. WOC. ND BOP. Cut off WH. Install dry hole marker w/10 sx Class "B" cmt. RD. Rig released. Well plugged and abandoned 2-26-96.

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

Signed [Signature] Title Regulatory Administrator Date 2/28/96

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

APPROVED

MAR 04 1996

DISTRICT MANAGER

NMOC