Return well 18. I hereby certify that the foregoing I SIGNED (This space for Federal or State off APPROVED BY CONDITIONS OF APPROVAL, IF A	CO USO)	Regulatory Affa	MAYO 41089 OIL COM. DIV OILS (WS.) 04-26-89 APPROVED A
Return well 18. I hereby certify that the foregoing is signed. (This space for Federal or State of APPROVED BY	CC USC) TITLE		MAYO 4 1989 OIL COM. DIV ORT 9 APPROVED APPROVED APPROVED APPROVED APPROVED APPROVED APPROVED
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Return well 18. I hereby certify that the foregoing in the control of the contro	1 0 O	Regulatory Affa	MAYO 4 1989 OIL COM. DIV FIELD APPROVED
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= · · · · · · · · · · · · · · · · · · ·	to production.	yer: Kun 2 3/8	rnd. and terease rid.
Tin and clea	an to PBTD. Spot ac	id 3028-2656'.	TOOH. Run logs. Perf 3 tbg. and release rig.
csg liner,	Tin, set liner hand	ier @ 2705'. Ce	ement csg in place, WOC.
clean. Mill	@ +3028', push to	TD @ 3070', TO	OOH. PH 4 1/2" 10 5# V-55
MOL&RU. ND	WH. NU BOP TOOH WA	'2 3/8# £ha mir	H to +3025', blow hole
It is inten	ded to perform the	following:	
nent to this work.) *		menoused with fine set	and any air markers and sones beili-
	ERATIONS (Clearly state all pertinent nonally drilled, give subsurface location	details and the most and	tes, including estimated date of starting any rtical depths for all markers and sones perti-
(Note: Report result			uits of muitiple completion on Well unpletion Report and Log form.)
SHOOT OF ACIDIZE	ABANDON* CHANGE PLANS	SHOOTING OR ACIDIZING (Other)	ABANDONMENT*
FRACTURE TREAT SHOOT OR ACIDIZE	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
NOTICE OF INTE			SEQUENT REPORT OF:
16. Check A	appropriate Box To Indicate No	ture of Notice, Report, o	r Other Data
1.0		6425 'GL	San Juan NM
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, I	,	12. COUNTY OR PARISH! 13. STATE
14. PERMIT NO.			N.M.P.M.
~ .	\$ \$ \$7		SURVEY OF AREA Sec: 17, T-29-N, R-8/4
25 . 35			Basin Fruitland Coal
See giso space I (Delow.)	clearly and in accordance with any S	tate requirements.	10. PIELD AND POOL, OR WILDCAT
Pos	t Office Box 4289,	Parmington,NM 87	I
3. ADDRESS OF OPERATOR			9. WBLL NO.
OIL GAS OF MELL OF MELL OF MEER 2. NAME OF OPERATOR Meridian Oil Inc.			Day
			8. PARM OR LEASE NAME
			7. UNIT AGREEMENT NAME
	corais to drill or to deepen or plug ba	possis.)	
LOV HUL USE LIES FORM FOR DRAN	TICES AND REPORTS O		THE OF THE PARTY
	AU OF LAND MANAGEMENT		SF-078414A 6. IF INDIAN, ALLOTTER OR TRIBE NAME
SUNDRY NO	(Formerly 9-331) DEPARIMENT OF THE INTERIOR vert		5. LEASE DESIGNATION AND SERIAL NO.
SUNDRY NO		Oakan to a	Expires August 31, 1985
SUNDRY NO	UNITED STATES	SUBMIT IN TRIPLICAT	Budget Bureau No. 1004-0135

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.