

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well GAS	5. Lease Number SF-078596
2. Name of Operator MERIDIAN OIL	6. If Indian, All. or Tribe Name
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700	7. Unit Agreement Name
4. Location of Well, Footage, Sec., T, R, M 955'FNL, 1690'FEL Sec.3, T-29-N, R-8-W, NMPM	8. Well Name & Number Howell C #201
	9. API Well No. 30-045-29108
	10. Field and Pool Basin Ft Coal
	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

<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 Injectio
	<input type="checkbox"/> Other -	

13. Describe Proposed or Completed Operations

06-20-94 TD 232'. Spud @ 11:30 a.m. 06-20-94. Drl surface hole. Ran 5 jts 9 5/8", 36.0#, K-55 csg set @ 232'. Cmt w/160 sx Class "G" w/3% calcium chloride and 0.25 pps flocele (189 cu.ft.). Circ 16 bbl cmt to surface.

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JUL 15 1994
OIL & GAS DIV.
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14. I hereby certify that the foregoing is true and correct.

Signed [Signature] Title Regulatory Affairs Date 7/6/94

(This space for Federal or State Office use)
APPROVED BY _____ Title _____ Date _____
CONDITION OF APPROVAL, if any: _____

NMOC

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