

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		APR 10 1987	7. UNIT AGREEMENT NAME San Juan 30-6 Unit
2. NAME OF OPERATOR Meridian Oil Inc.		BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA	8. FARM OR LEASE NAME San Juan 30-6 Unit
3. ADDRESS OF OPERATOR Post Office Box 4289, Farmington, NM 87499			9. WELL NO. 401
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1670'S, 830'W			10. FIELD AND POOL, OR WILDCAT Undes. Fruitland
14. PERMIT NO.		15. ELEVATIONS (Show whether OF, RT, GR, etc.) 6248'GL	11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA Sec. 13, T-30-N, R-7 -W N.M.P.M.
			12. COUNTY OR PARISH 13. STATE Rio Arriba NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	CELL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

09-17-86 Loaded tubing w/20 bbls. water. Pumped casing-tubing annulus w/8000 gal. 7 1/2% HCl acid, and 20,000 gal. water. Flushed w/2700 gal. water. Put well on line.

10-08-86 Pulled rods and 2 7/8" tbg.

10-09-86 Reran 107 jts. 2 7/8", 6.5#, J-55 tbg, 3120' set @ 3132'.

02-06-87 Loaded tubing w/20 bbls. water. Pumped casing-tubing annulus w/12,000 gal. water, flushed w/3360 gal. water. Blew casing to pit. Pumped casing-tubing annulus w/10,000 gal. water, flushed w/3360 gal. water. Blew casing to pit. Pumped casing - tubing annulus w/4,000 gal. water, flushed w/3360 gal. water. Blew casing to pit. Put well on line.

RECEIVED

APR 21 1987

OIL CON. DIV

DIST. 3

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

SIGNED J. D. Salami TITLE Drilling Engr. DATE 04-07-87

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

NMOC