

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
FARM MAIL ROOM

Sundry Notices and Reports on Wells

30 SEP -6 PM 1:39

1. Type of Well
GAS

2. Name of Operator
MERIDIAN OIL

3. Address & Phone No. of Operator
PO Box 4289, Farmington, NM 87499 (505) 326-9700

4. Location of Well, Footage, Sec., T, R, M
910' FSL, 790' FWL, Sec. 14, T-30-N, R-5-W, NMPM

5. Lease Number
SF-080538
6. If Indian, All. or
Tribe Name
7. Unit Agreement Name
San Juan 30-5 Unit
8. Well Name & Number
San Juan 30-5 U #255
9. API Well No.
30-039-25532
10. Field and Pool
Basin Fruitland Coal
11. County and State
Rio Arriba 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 Injection
	<input checked="" type="checkbox"/> Other -	

13. Describe Proposed or Completed Operations

8-14-95 MIRU. ND WH. NU BOP. TIH to 3050'. Drill @ 3109-3277'. Circ hole clean. POOH.
8-15-95 TIH w/underreamer. Underream @ 3165-3277'. TOOH. Circ hole clean. Blow well &
CO.
8-16/30-95 Blow well & CO.
8-31-95 TOOH. TIH w/4 jts 5 1/2" 15.5# K-55 LTC lnr, set @ 3276'. Top of lnr @ 3097'.
TOOH. TIH w/mill, mill perf plug @ 3188-3276'. TOOH. TIH w/103 jts 2 3/8" 4.7#
J-55 tbg, landed @ 3240'. ND BOP. NU WH. PT WH seal to 3000 psi/15 min, OK.
Pump out check plug. RD. Rig released.

SEP 11 1995

OIL CON. DIV.

DIST. 3

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

Signed [Signature] Title Regulatory Administrator Date 9/5/95

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

SEP 07 1995

NMOCD

FARMINGTON DISTRICT OFFICE
BY [Signature]