

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

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  
1190'FNL, 1840'FWL, Sec.10, T-29-N, R-12-W, NMPM

- 5. Lease Number  
SF-065557
- 6. If Indian, All. or Tribe Name
- 7. Unit Agreement Name
- 8. Well Name & Number  
Cornell #7
- 9. API Well No.  
30-045-08605
- 10. Field and Pool  
Fulcher Kutz Pict.Cliffs
- 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 checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment        | <input type="checkbox"/> Change of Plans         |
| <input 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

Meridian Oil Inc. respectfully requests a one year extension to evaluate this well for re-stimulation in the Pictured Cliffs formation. This well has a known mechanical failure which was isolated utilizing a packer in February, 1995.

RECEIVED  
MAR 5 1995

THIS APPROVAL EXPIRES DEC 27 1995

OFFICE OF THE DISTRICT MANAGER  
SANTA FE, NM

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

Signed *Deanna Stanfield* (KJ2) Title Regulatory Affairs Date 3/23/95

(This space for Federal or State Office use)  
APPROVED BY \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

CONDITION OF APPROVAL, if any:

APPROVED

MAR 2 1995

DISTRICT MANAGER