

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

Sundry Notices and Reports on Wells

<p>1. Type of Well GAS</p> <hr/> <p>2. Name of Operator Meridian Oil Inc. Southland</p> <hr/> <p>3. Address & Phone No. of Operator Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec, T, R, M. 990'S, 990'W Sec. 7, T-29-N, R-11-W, NMPM</p> <hr/> <p>12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 33%;">Type of Submission</td> <td colspan="2" style="text-align: center;">Type of Action</td> </tr> <tr> <td><input type="checkbox"/> Notice of Intent</td> <td><input type="checkbox"/> Abandonment</td> <td><input type="checkbox"/> Change of Plans</td> </tr> <tr> <td><input type="checkbox"/> Subsequent Report</td> <td><input type="checkbox"/> Recompletion</td> <td><input type="checkbox"/> New Construction</td> </tr> <tr> <td><input type="checkbox"/> Final Abandonment</td> <td><input type="checkbox"/> Plugging Back</td> <td><input type="checkbox"/> Non-Routine Fracturing</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Casing Repair</td> <td><input type="checkbox"/> Water Shut Off</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Altering Casing</td> <td><input type="checkbox"/> Conversion to Injectio</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Other</td> <td></td> </tr> </table> <hr/> <p>13. Describe Proposed or Completed Operations</p>	Type of Submission	Type of Action		<input 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 Injectio		<input type="checkbox"/> Other		<p>5. Lease Number SF-077317</p> <p>6. If Indian, All.or Tribe Name</p> <p>7. Unit Agreement Name</p> <p>8. Well Name & Number Cooper #2</p> <p>9. API Well No.</p> <p>10. Field and Pool Fulcher Kutz Pic. Cliff.</p> <p>11. County and State San Juan County, NM</p>
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Please cancel our request to plugback this wellbore to the Fruitland Coal formation.

RECEIVED
MAR 2 1992
OIL CON. DIV.
FARMINGTON, NM

RECEIVED
MAR 2 1992
FARMINGTON, NM

14. I hereby certify that the foregoing is true and correct
Signed Peggy Shapard Title Regulatory Affairs Date 2-19-92
(KAS)

ACCEPTED FOR RECORD

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE FEB 28 1992
CONDITION OF APPROVAL, IF ANY: _____

NMCCO

FARMINGTON RESOURCE AREA
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