

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
BLM MAIL ROOM

Sundry Notices and Reports on Wells

96 FEB 14 AM 8:57

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
1710' FSL, 880' FWL, Sec.20, T-30-N, R-8-W, NMPM

5. Lease Number
SF-078578A
6. If Indian, All. or
Tribe Name
7. Unit Agreement Name
8. Well Name & Number
Howell K #6
9. API Well No.
30-045-26400
10. Field and Pool
Blanco Pictured 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 checked="" type="checkbox"/> Abandonment | <input checked="" 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 type="checkbox"/> Other - | |

13. Describe Proposed or Completed Operations

Please cancel the intent to repair the bradenhead of the subject well approved 1-9-96. It is now intended to plug and abandon the well. A procedure and wellbore diagram will be submitted by 6-1-96.

RECEIVED
FEB 20 1996

OIL CON. DIV.
DIST. 8

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

Signed [Signature] (VGW6) Title Regulatory Administrator Date 2/12/96

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

APPROVED

FEB 16 1996
[Signature]
DISTRICT MANAGER

NMOCD