Form 3160-5 November 1983) Formerly 9-331)	UNITED STATES DEPARTMENT OF THE INTER			
SUND (Do not use this fo	BUREAU OF LAND MANAGEMENT NOTICES AND REPORTS  OF THE FOR PROPOSALIS TO DESCRIPTION FOR PERMIT—" for such	ON WELLS	SF-078197 6. IF INDIAN. ALLOTTE	SMAN BEIST SO
OIL GAS OTESS			7. UNIT AGREEMENT HAME	
NAME OF OPERATOR			8. PARM OR LEASE NAME	
M ADDRESS OF OPERATOR	eridian Oil Inc.		Nye	
	ost Office Box 4289, Far	mington, NM 87499	290 10. FIELD AND POOL, O	E WILDCAT
At surface 790'N, 805'E			Basin Fruitland Coal 11. ESC., T., B., M., OB BLE. AND SURVEY OR ABBA Sec. 08, T-29-N, R-10-W	
1. PERMIT NO. 15. ELEVATIONS (Show whether OF, RT, OR, etc.)			N.M.P.M.	13. STATE
	5790 <b>'</b> GL		San Juan	NM
6.	Check Appropriate Box To Indicate	Nature of Notice, Report, or O	ther Data	
NOTICE OF INTENTION TO: BURES			CENT REPORT OF:	
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE	PULL OR ALTER CASING MULTIPLE COMPLETE ASSANDON®	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING	ESPAIRING V ALTERING C ARANDONME	ASING
REPAIR WELL (Other)	CHANGE PLANS	Other) SI Nors: Report results Completion or Recomple		
optoposed work. If the nent to this work.)	TOMPLETED OPERATIONS (Cleans state all pertiament is directionally drilled, give subsurface los	ent details, and give pertinent dates, cations and measured and true vertical	including estimated dat depths for all markers	e of starting any s and sones perti-
12-15-88	Spudded well at 5:30 jts. 9 5/8", 32.3#, E Cemented with 150 sks 3% calcium chloride WOC 12 hrs. Tested 6	H-40 surface casing s. Class "B" with l, (177 cu.ft.). circu	set at 239' /4#/sk. gel <del>-</del> lated to sur	flake and
12-18-88	TD 2207'. Ran 70 jts 2194' set @ 2207'. @ with 6% gel, 2% calc: cu.ft.), followed by chloride (118 cu.ft. Circulated to surface	Cemented with 280 sium chloride, 1/2 ci 100 sx. Class "B" i ). WOC 12 hours. He	ks. Class "B u.ft. perlit with 2% calc ld 1200#/30	8" 65/35 :e/sx (540 :ium
20 PH 2: 5			CENT	
A PARTIE OF THE	the foregoing is true and correct	(		். நக் ———————
SIGNED SIGNED	X	egulatory Affairs	DATE	12-19-88
(This space for Federa	al or State office use)		<u> </u>	TOP DEMORD
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:			ACCEPTED FOR RELORD	
		ORCE	DEG &	2 1938