UNITED STATES

DEPARTMENT OF THE INTERIOR

	BUREAU C)F LAND MANAGEMENT	entres of the second	
	Sundry Noti	ces and Reports on Wel	.ls	
Type of Well		DEGES JAN 1 2 18	5. 6.	Lease Number NM-0607 If Indian, All. or Tribe Name
			7.	Unit Agreement Name
Name of Operat		OIL COM.		
MERIDIAN		DIST. 3	8.	Well Name & Number Atlantic C #6
Address & Phone	ne No. of Operat	tor 87499 (505) 326-9700	9.	API Well No.
. Location of Well, Footage, Sec., T, R, M				30-045-09854 Field and Pool
1552'FSL, 933'FWL, Sec. 6, T-30-N, R-10-W, NMPM			11	Blanco Mesaverde . County and State
			11.	San Juan Co, NM
CHECK ADDOOR	DIAME BOY TO IN	DICATE NATURE OF NOTIC	E, REPORT, OTHER	R DATA
Type of Submi	ssion	Type of A	ction	•
Notic	e of Intent	Abandonment	Change of Pl	lans
		Recompletion	New Construction	ction Fracturing
$_{\tt X}$ _ Subse	quent Report	Plugging Back Casing Repair	Water Shut	
Final	Abandonment	Altering Casing	Conversion	to Injection
Fillar	Abandonment	X Other - Pay add		• • • • • • • • • • • • • • • • • • •
		oleted Operations		
12-27-95 12-28-95 12-29-95	Ran csg scraper 4712'. Load ho Hcl across Men psi, TOC @ 328 PT 4 1/2" csg @ 4561-4824' w w/6 bbl 1% Kcl w/1 SPF @ 4561 Frac Menefee w 20/40 Super LC TOOH. TIH to 4 Cliff House in Perf Cliff House in 15% Hcl.	J BOP. TOOH w/171 jts 2 to 5394'. TOOH. TIH to ble w/1% Kcl wtr. PT Claefeee interval. TOOH. 30'. Ran CNL @ 4100-492 to 3800 psi, OK. Releaving to 100 psi, OK. Releaving to 1	RV4 1/2" CIBP, S IBP to 1000 psi, RU, ran CBL-CCL 25'. RD. TIH w/4 Ase pkr, TOOH. P Spot 10 bbl 15% cotted 10 bbl 15 /1500 gal 15% Hc 1, 71,000# 20/40 . CO after frac. Kcl wtr. Spot 50 to 3800 psi, OK. 1 w/18 holes tot	OK. Spot 270 gal 15% -GR @ 0-4930' w/1000 1/2" pkr, set @ 65'. erf Menefee w/1 SPF Hcl in tbg, displaced % Hcl. Re-perf Menefel 1. TOOH. O Arizona sd, 13,000# TIH w/RBP, set @ 454 0 gal 15% Hcl across Dump 2 sx sd on RBP cal. Acidize w/1500 gal 20/40 Arizona sd,
	15,860# 20/40 after frac.	Super LC sd, 62 bbl 2	5% linear gel. S	of for get break. co
		Continu	ed on back	
1 hereby		e foregoing is true and	Administrator_Da	
This space for	Federal or Sta	te Office use)Title	Date	ACCEPTED FOR RECO
CONDITION OF AF	PROVAL, if any:			

NMOCD

FARMINGTON DISTRICT OFFICE BY 2

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