

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</p> <hr/> <p>3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec., T, R, M 890' FSL, 1800' FWL Sec. 15, T-32-N, R-7-W, NMPM</p>	<p>5. Lease Number SF-068459B 078759-B</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name Allison Unit</p> <p>8. Well Name & Number Allison Unit #16</p> <p>9. API Well No.</p> <p>10. Field and Pool Blanco MV/Basin Dk</p> <p>11. County and State San Juan Co, NM</p>
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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

It is intended to change the status of this well to a pressure observation well.

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NOV 10 1993

OIL CON. DIV.

DIST. 3

THIS APPROVAL EXPIRES NOV 05 1995

070 FARMINGTON, NM
93 OCT 29 AM 9:33

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BLM

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

Signed [Signature] (JAS) Title Regulatory Affairs Date 10/28/93

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

CONDITION OF APPROVAL, if any:

Date

APPROVED

NOV 05 1993

DISTRICT MANAGER

STATE OF NEW MEXICO
ENERGY and MINERALS
DEPARTMENT

This form is not to
be used for reporting
packer leakage tests
in Southeast New Mexico

OIL CONSERVATION DIVISION

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Revised 10/01/78

NORTHWEST NEW MEXICO PACKER-LEAKAGE TEST

Operator MERIDIAN OIL INC. Lease ALLISON Well No. 16
Location
of Well: Unit N Sect 15 Twp. 32N Rge. 7W County SAN JUAN

	NAME OF RESERVOIR OR POOL	TYPE OF PROD. (Oil or Gas)	METHOD OF PROD. (Flow or Art. Lift)	PROD. MEDIUM (Tbg. or Csg.)
Upper Completion	MESAVERDE	GAS	FLOW	TBG
Lower Completion	DAKOTA	GAS	FLOW	TBG

PRE-FLOW SHUT-IN PRESSURE DATA

Upper Completion	Hour, date shut-in	Length of time shut-in	SI press. psig	Stabilized? (Yes or No)
	5-8-95	5 DAYS	617	
Lower Completion	Hour, date shut-in	Length of time shut-in	SI press. psig	Stabilized? (Yes or No)
	5-8-95	3 DAYS	836	

FLOW TEST NO. 1

Commenced at (hour,date)* 5-11-95				Zone producing (Upper or Lower) LOWER	
TIME (hour,date)	LAPSED TIME SINCE*	PRESSURE		PROD. ZONE TEMP	REMARKS
		Upper Completion	Lower Completion		
9-May		605	790		
10-May		613	815		
11-May		617	836		
12-May		619	338		
13-May		621	341		

Production rate during test

Oil: _____ BOPD based on _____ Bbls. in _____ Hours. _____ Grav. _____ GOR _____

Gas: _____ MCFPD; Tested thru (Orifice or Meter): _____

MID-TEST SHUT-IN PRESSURE DATA

Upper Completion	Hour, date shut-in	Length of time shut-in	SI press. psig	Stabilized? (Yes or No)
Lower Completion	Hour, date shut-in	Length of time shut-in	SI press. psig	Stabilized? (Yes or No)

(Continue on reverse side)

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JUN - 9 1995

OIL CON. DIV.
BOST. 3

NORTHWEST NEW MEXICO PACKER-LEAKAGE TEST

Page 2

FLOW TEST NO. 2

Commenced at (hour, date): **				Zone producing (Upper or Lower):	
TIME (hour, date)	LAPSED TIME SINCE **	PRESSURE		PROD. ZONE	REMARKS
		Upper Completion	Lower Completion	TEMP.	

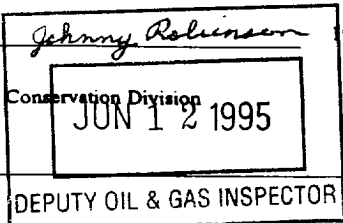
Production rate during test

Oil: _____ BOPD based on _____ Bbls. in _____ Hours. _____ Grav. _____ GOR _____

Gas: _____ MCFPD; Tested thru (Orifice or Meter): _____

Remarks: _____

I hereby certify that the information herein contained is true and complete to the best of my knowledge.

Approved _____ New Mexico Oil Conservation Division By _____ Title _____		Operator _____ Meridian Oil Inc. By _____ Tanya Atcitty Title _____ Operations Associate Date _____ 5/6/95
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NORTHWEST NEW MEXICO PACKER LEAKAGE TEST INSTRUCTIONS

1. A packer leakage test shall be commenced on each multiply completed well within seven days after actual completion of the well, and annually thereafter as prescribed by the order authorizing the multiple completion. Such tests shall also be conducted on all multiple completions within seven days following recompletion and/or chemical or fracture treatment, and whenever remedial work has been done on a well during which the packer or the tubing have been disturbed. Tests shall also be taken at any time that communication is suspected or when requested by the Division.
2. At least 72 hours prior to the commencement of any packer leakage test, the operator shall notify the Division in writing of the exact time the test is to be commenced. Offset operators shall also be so notified.
3. The packer leakage test shall commence when both zones of the dual completion are shut-in for pressure stabilization. Both zones shall remain shut-in until the well-head pressure in each has stabilized, provided however, that they need not remain shut-in more than seven days.
4. For flow Test No. 1, one zone of the dual completion shall be produced at the normal rate of production while the other zone remains shut-in. Such test shall be continued for seven days if the case of a gas well and for 24 hours in the case of an oil well. Note: if, on an initial packer leakage test, a gas well is being flowed to the atmosphere due to the lack of a pipeline connection the flow period shall be three hours.
5. Following completion of flow Test No. 1, the well shall again be shut-in, in accordance with Paragraph 3 above.
6. Flow Test No. 2 shall be conducted even though no leak was indicated during flow Test No. 1. Procedure for Flow Test No. 2 is to be the same as for Flow Test No. 1

- except that the previously produced zone shall remain shut-in while the zone which was previously shut-in is produced.
7. Pressures for gas-zone tests must be measured on each zone with a deadweight pressure gauge at time intervals as follows: 3 hours tests: immediately prior to the beginning of each flow-period, at fifteen minute intervals during the first hour thereof, and at hourly intervals thereafter, including one pressure measurement immediately prior to the flow period, at least one time during each flow period (at approximately the mid-way point) and immediately prior to the conclusion of each flow period. Other pressures may be taken as desired, or may be requested on wells which have previously shown questionable test data.
 - 24-hour oil zone tests: all pressures, throughout the entire test, shall be continuously measured and recorded with recording pressure gauges the accuracy of which must be checked at least twice, once at the beginning and once at the end of each test, with a deadweight pressure gauge. If a well is a gas-oil or an oil-gas dual completion, the recording gauge shall be required on the oil zone only, with deadweight pressures as required above being taken on the gas zone.
 8. The results of the above described tests shall be filed in triplicate within 15 days after completion of the test. Tests shall be filed with the Aztec District Office of the New Mexico Oil Conservation Division of Northwest New Mexico Packer Leakage Test form Revised 10/01/78 with all deadweight pressures indicated thereon as well as the flowing temperatures (gas zones only) and gravity and GOR (oil zones only).