CONDITION OF APPROVAL, IF ANY:

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

Sundry No	tices and Reports on	Wells
1. Type of Well GAS		5. Lease Number SF-078513 6. If Indian, All.or Tribe Name
2. Name of Operator		7. Unit Agreement Name San Juan 32-9 Unit
Meridian Oil Inc.  3. Address & Phone No. of Operator Box 4289, Farmington, NM 87499 (505)326-9700  4. Location of Well, Footage, Sec, T, R, M. 990'S, 990'W Sec. 17, T-32-N, R-9-W, NMPM		8. Well Name & Number San Juan 32-9 Unit NP#78 9. API Well No.
		10.Field and Pool Blanco Mesa Verde 11.County and State San Juan County, NM
2.CHECK APPROPRIATE BOX TO		
Type of Submission Notice of Intent	Type of Abandonment	Change of Plans
Subsequent Report	<pre> Recompletion Plugging Back Casing Repair</pre>	<pre> New Construction Non-Routine Fracturing Water Shut Off</pre>
Final Abandonment		Conversion to Injection
13. Describe Proposed or Co	-	
A ninety day extension to p to obtain the necessary par Amoco's approved sundry not	tner approvals. The	
		APR 2 4 1991
		OIL CON. D.V.
THIS A	PPROVAL EXPIRES JUL 0	1 1991
14. I hereby certify that Signed July Mad Luck	the foregoing is true <u>DM)</u> Title <u>Regulatory</u>	H .
(This space for Federal or	State office use)	
ADDDOUFD BY	<b>ጥተ</b> ሞፒ.ድ	APA <sub>112</sub> 6 1991