

submitted in lieu of Form 3160-5

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

RECEIVED  
OIL FIELD ROOM

95 NOV -6 PM 2:22

070 FARMINGTON, NM

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  
1227' FNL, 1090' FEL, Sec.18, T-32-N, R-9-W, NMPM

5. Lease Number  
SF-078513  
6. If Indian, All. or  
Tribe Name  
7. Unit Agreement Name  
San Juan 32-9 Unit  
8. Well Name & Number  
San Juan 32-9 U #77  
9. API Well No.  
30-045-11465  
10. Field and Pool  
Blanco Mesaverde  
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 type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" 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

10-26-95 MIRU. ND WH. NU BOP. TOO H w/160 jts 2 3/8" tbg. SDON.  
10-27-95 TOO H w/rest 2 3/8" tbg. TIH w/csg scraper to 5959'. TOO H. TIH w/RBP, set @ 5820'. Circ hole clean. PT csg, failed. TOO H. SD for weekend.  
10-30-95 TIH w/5 1/2" pkr, set @ 3830'. PT csg to 1000 psi, OK. TOO H w/pkr. TIH w/7 5/8" pkr, set @ 3830'. Made multiple tool settings to locate csg failure. TOO H w/pkr. TIH w/retrieving tool. Latch RBP, TOO H.  
10-31-95 TIH w/2 3/8" 4.7# J-55 tbg, landed @ 5954'. ND BOP. NU WH. RD. Rig released.

Well being considered for plug and abandonment.

RECEIVED  
DEC 1 1 1995

OIL CON. DIV.  
DEC 3

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

Signed [Signature] Title Regulatory Administrator Date 11/3/95

(This space for Federal or State Office use)

APPROVED BY \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

NOV 09 1995

NMOCD

FARMINGTON DISTRICT OFFICE  
BY [Signature]