UNITED STATES

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

Sundry Not	ices and Reports on Wel	ls	
		5.	Lease Number
			NM-01614
l. Type of Well GAS		6.	If Indian, All. or Tribe Name
		7.	Unit Agreement Name
2. Name of Operator		•	
MERIDIAN OIL			
		8.	Well Name & Number
3. Address & Phone No. of Opera		2	Thompson #9
PO Box 4289, Farmington, NM	1 87499 (505) 326-9700	9.	API Well No. 30-045-11669
6 TV-13 Thomas 6	To M D M	1.0	Field and Pool
4. Location of Well, Footage, S 990'FSL, 920'FWL, Sec.28, T-	-31-N. R-12-W. NMPM	10.	Blanco MV/Basin DK
990 FSE, 920 FWE, Sec.20, 1-	51 M, N 12 M, MIIII	11.	County and State
			San Juan Co, NM
12. CHECK APPROPRIATE BOX TO IN	NDICATE NATURE OF NOTICE	, REPORT, OTHER	DATA
Type of Submission	Type of Ac	tion	
X Notice of Intent		X_{\perp} Change of Pla	
- -	Recompletion	New Construc	,,
Subsequent Report	Plugging Back _	Non-Routine	
	Casing Repair _	Water Shut o	
Final Abandonment	Altering Casing Other -	conversion c	o injection
	Other -		
13. Describe Proposed or Com	oleted Operations		
It is proposed to follow subject well thro	the original plug and a ough Step #7 but to modi	abandonment proc fy Step #8 in th	edure of-the manner:
A CIBP will be se	et at2505', which is the	base of the pro	pposed Pictured Cliff
plug. The wellbor injection/falloff	re will then be perforat test performed. It is	ed from 2442-244 then intended to	18' and a water o increase the amount
cement of Plug #5	(Step #8) to 63 sx of	cement to include	de 100% excess volume
across the perfor	cated interval. It is th	en intended to	corrow the remaining
portion of the pl	lug and abandon procedur	e as originarly	Intenueu.
		ln) l	SPETTATION
		1171	
		U 🗓	1411 0 4 6000
			JAN Z 4 1883
		(3) <i>III</i>	l Goris, iday
			- Jano DIV.
14. I hereby certify that th	e foregoing is true and	correct.	लागाः श
Signed May Malhiel	(KASFRT) Title Regul	atory Administra	tor_Date 1/4/96
(This space for Federal or Sta			
APPROVED BY	Title	Date _	
CONDITION OF APPROVAL, if any:			
			man different

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