

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

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR <u>Meridian Oil inc.</u></p> <p>3. ADDRESS OF OPERATOR <u>Post Office Box 4289, Farmington, NM 87499</u></p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <u>1840'S, 1060'W</u></p> <p>14. PERMIT NO. _____</p> <p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>5616'GL</u></p>	<p>5. LEASE DESIGNATION AND SERIAL NO. <u>MOO-C-1420-0625</u></p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME <u>Ute Mt Tribe</u></p> <p>7. UNIT AGREEMENT NAME _____</p> <p>8. FARM OR LEASE NAME <u>Pinon Mesa B</u></p> <p>9. WELL NO. <u>1</u></p> <p>10. FIELD AND POOL, OR WILDCAT <u>Basin Fruitland Coal</u></p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Sec. 25, T-31-N, R-14-W</u> <u>N.M.P.M.</u></p> <p>12. COUNTY OR PARISH <u>San Juan</u></p> <p>13. STATE <u>NM</u></p>
---	--

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	
(Other) _____		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

It is intended to work this well over in the following manner:

MOL&RU. NDWH, NUBOP. Pull out of retainer @ 6041'. Attempt to circ clean w/KCl wtr. TIH to cmt retainer @ 6041'. TIH to 5000', set pkr, PT retainer & csg to 2500#. Load backside & attempt to PT to 2500#. Release pkr, isolate leak. Cmt squeeze. WOC. Drl cmt plug. Test csg to 1000#/15 min. TIH & drl cmt retainer @ 6041'. CO to PBSD. LDDC: Land tbg. ND BOP. NUWH. Release rig. Return well to production.

RECEIVED

JUL 4 1989

OIL CON. P
DEPT

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

SIGNED [Signature] TITLE Regulatory Affairs ^{es} DATE 06-29-89

(This space for Federal or State office use)

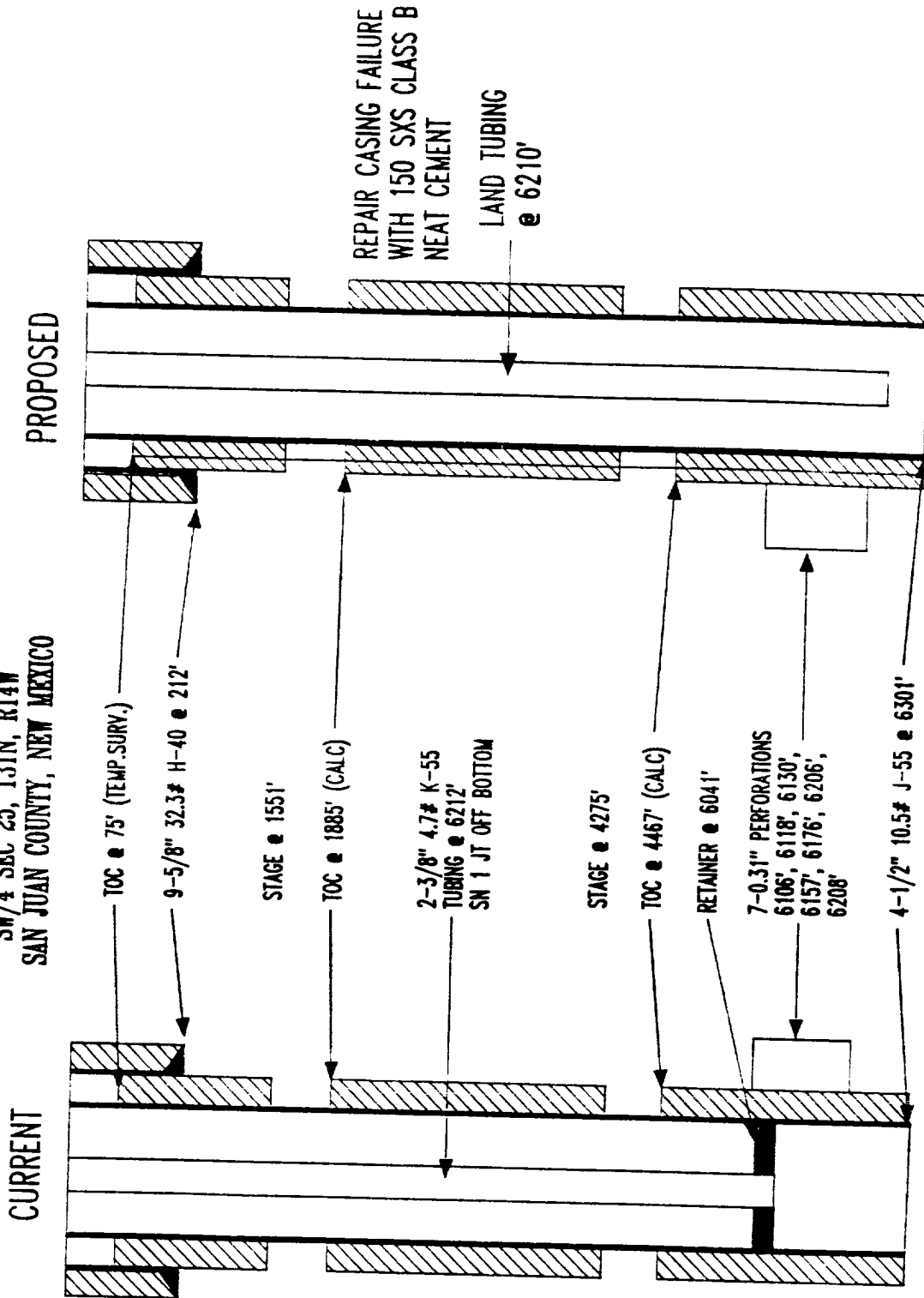
APPROVED BY Sally Wisely TITLE AREA MANAGER DATE JUL 10 1989

CONDITIONS OF APPROVAL, IF ANY:

NMOED
*See Instructions on Reverse Side

PINON MESA B #1

SW/4 SEC 25, T31N, R14W
SAN JUAN COUNTY, NEW MEXICO



DF-5626'
GL-5616'

PICTURED CLIFFS-1375'

MESAVERDE-3030'

POINT LOOKOUT-3835'

GALLUP-5197'
GREENHORN-5982'
GRANEROS-6035'
DAKOTA-6100'

TD-6301'
P8TD-6285'

MAY 31, 1989