

submitted in lieu of Form 3160-5

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
SEP 1 1995

Sundry Notices and Reports on Wells

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  
1750' FSL, 950' FEL, Sec.17, T-31-N, R-10-W, NMPM

- 5. Lease Number  
SF-078604
- 6. If Indian, All. or Tribe Name
- 7. Unit Agreement Name
- 8. Well Name & Number  
Scott #8
- 9. API Well No.  
30-045-21819
- 10. Field and Pool  
Blanco Pictured Cliffs
- 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other - Bradenhead repair
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

- 8-2-95 MIRU. SDON.
- 8-3-95 Attempt to PT csg, failed. Load hole w/wtr, PT csg, OK. RU, ran CBL w/600 psi @ 50-900', TOC @ 340'. Perf 2 sqz holes @ 330'. RD. Circ 20 bbl wtr through perfs & out bradenhead. Establish injection. Pump 125 sx Class "G" cmt w/2% calcium chloride. Displace w/1.5 bbl wtr. Sqz to 400 psi. WOC. Circ 2 bbl cmt to surface.
- 8-4-95 TIH, tag cmt @ 140'. Drill cmt @ 140-335'. PT csg to 600 psi, OK. TIH to 2630'. Blow well clean to 2994'. TOOH. SDON.
- 8-5-95 ND BOP. NU WH. RD. Rig released.

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OIL

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

Signed [Signature] Title Regulatory Administrator Date 8/21/95

(This space for Federal or State Office use)

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

Date

CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

AUG 29 1995

FARMINGTON DISTRICT OFFICE  
BY [Signature]

NMOCD