

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
OCT 13 1994

Sundry Notices and Reports on Wells

070 FARMINGTON, NM

Lease Number
SF-080517

1. Type of Well
GAS

6. If Indian, All. or
Tribe Name

2. Name of Operator
MERIDIAN OIL

7. Unit Agreement Name

3. Address & Phone No. of Operator
PO Box 4289, Farmington, NM 87499 (505) 326-9700

8. Well Name & Number
Payne Federal #6

9. API Well No.
30-045-25903

4. Location of Well, Footage, Sec., T, R, M
1667'FSL, 805'FEL, Sec.20, T-32-N, R-10-W, NMPM

10. Field and Pool
Cedar Hill Frt Coal

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 checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input 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

It is intended to close this salt water evaporation pit according to the following procedure:

The existing perimeter fence will be removed. Fluids remaining in the evaporation pit will be removed using a vacuum truck. The inside of pit liner will be rinsed using fresh water. Once the liner has been rinsed, the rinsate will be removed using a vacuum truck. The rinsate will be disposed of in an injection well. The pit liner will be removed and salvaged for beneficial use. After the pit liner has been removed, the excavation will be backfilled. The area will be shaped and seeded with an approved seed mixture to minimize future erosion.

RECEIVED
NOV 2 1 1994

OIL & GAS DIV
DIST 3

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

Signed [Signature] Title Regulatory Affairs Date 10/13/94

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date NOV 16 1994

CONDITION OF APPROVAL, if any:

APPROVED

DISTRICT MANAGER