

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE-
(Other instructions on re-
verse 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.)

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Meridian Oil Inc.	8. FARM OR LEASE NAME Scott
3. ADDRESS OF OPERATOR Post Office Box 4289, Farmington, NM 87499	9. WELL NO. 100
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below) At surface 1460'N, 1150'E	10. FIELD AND POOL, OR WILDCAT Cedar Hill Basal Ft
14. PERMIT NO.	11. SEC. T. R. M. OR BLM. AND SURVEY OR AREA Sec. 29, T-32-N, R-10-W N.M.P.M.
15. ELEVATIONS (Show whether of, to, or from) 6193'GL	12. COUNTY OR PARISH 13. STATE San Juan NM

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

NOTICE OF INTENTION TO		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANE ☐	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.

01-14-88 MOL&RU. ND WH, NU BOP. Lay down 93 jts. 2 7/8" EUE tbg. SDFN.

01-15-88 Land 96 jts. 2 3/8", 4.7#, J-55 8rd EUE Class "B" tbg, 2977.05' set @ 2987.05'. Seating nipple @ 2955'. Released rig. Put well back on production.

RECEIVED
JAN 28 1988
OIL COM

18. I hereby certify that the foregoing is true and correct.
SIGNED [Signature] TITLE Drilling Clerk DATE 01-21-88
(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

NHCCG

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY [Signature]