

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 ☐	5. LEASE DESIGNATION AND SERIAL NO. NM-0607
2. NAME OF OPERATOR Meridian Oil Inc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Post Office Box 4289, Farmington, NM 87499	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1450'N, 1850'E	8. FARM OR LEASE NAME Atlantic A
14. PERMIT NO.	9. WELL NO. 211
15. ELEVATIONS (Show whether OP, RT, GR, etc.) 5984'GL	10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal
	11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec. 29, T-31-N, R-10-W N.M.P.M.
	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 PLANS ☐	(Other) ☐	(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.)*

11-18-88

TD 2585'. TIH w/7" RTTS pkr on 2 7/8" tbg. set Pkr @ 2562'. Test down tbg, ok. Test annulus, est. rate 1/2 BPM @ 1500 psi. Reset pkr @ 2092'. Stage tool @ 2100'. Test annulus, ok. Test down tbg, est. rate of 1/2 BPM @ 1000 psi. Reset pkr @ 2122'. Test down tbg, ok. Test annulus, est. rate of 1/4 BPM @ 1000 psi. TOOH w/pkr. TIH open ended & set tbg @ 2122'. Est inj rate of 1 BPM @ 1400 psi. Spot 100 gal. of 7 1/2% HCl. Wait 10 min. Pump acid thru hole @ 1.1 BPM @ 1500 psi. Pump 10 BW behind acid. Mixed 100 sks. Class "B" neat cmt w/2% calcium chloride (119 cu.ft.) & spot 2122-1597'. Pull 11 stds of tbg. Tbg set @ 1444'. Reversed out tbg w/10 BW. Pump down tbg & squeezed cmt away @ 1/4 to 1 BOM @ 1850-1900 psi. Pumped 12 bbls. displacement. Hesitate 15 min. Press held steady @ 1400 psi. Cont'd displ. Pressure up to 2000 psi. Held 5 min. SI tbg w/2000 psi. WOC 4 hrs. before releasing pressure on tbg. POOH. WOC 18 hrs. before drlg. cmt. WOC 24 hrs. before press testing squeeze to 2000 psi, ok.

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

SIGNED [Signature] TITLE Regulatory Affairs DATE 11-28-88

(This space for Federal or State office use)

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

*See Instructions on Reverse Side