

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

JUL 11 1996

Bureau of Land Management
Durango, Colorado

Sundry Notices and Reports on Wells

1. Type of Well
GAS

CONFIDENTIAL

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
1665' FSL, 1790' FEL, Sec. 20, T-32-N, R-14-W, NMPM

5. Lease Number
I-22-IND-2772
6. If Indian, All. or
Tribe Name
Ute Mountain Ute
7. Unit Agreement Name

8. Well Name & Number
Ute Mountain Ute #40
9. API Well No.
30-045-29354
10. Field and Pool
Barker Dome Desert Creek
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 -

13. Describe Proposed or Completed Operations

6-24-96 Drill to TD @ 8450'. Circ hole clean.
6-25-96 TOOH. Logging.
6-26-96 Logging. TIH, circ hole clean. TOOH.
6-27-96 TIH w/192 jts 5 1/2" 17# L-80 ST&C csg, set @ 8448'. Pump 30 bbl mud flush ahead w/40 bbl wtr. Cmt'd w/1730 sx Class "B" 50/50 Silicalite w/3 pps Gilsonite, 0.35 pps Flocele (4031 cu.ft.). Tailed w/320 sx Class "G" 50/50 poz w/2% gel, 0.25 pps Flocele, 0.4% fluid loss, 5 pps Gilsonite (422 cu.ft.). Circ 55 bbl cmt to surface. WOC. PT csg to 3800 psi, OK. ND BOP. NU WH. RD. Rig released.

ACCEPTED FOR RECORD

By: DUL 7-22-96
San Juan Resource Area
Bureau of Land Management

14. ~~DIA~~ hereby certify that the foregoing is true and correct.

Signed Nancy Olthmans for Title Regulatory Administrator Date 7/9/96

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

NMOC