submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
BLM
94 JUL 20 PM 2:07
070 FARMINGTON, NM

Sundry Notices and ~~Reports on Wells~~

RECEIVED
JUL 28 1994
OIL CON. DIV.
DIST. 3

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**
1550'FSL, 990'FWL, Sec.15, T-27-N, R-6-W, NMPM

5. **Lease Number**
SF-079365
6. **If Indian, All. or Tribe Name**
7. **Unit Agreement Name**
San Juan 28-6 Unit
8. **Well Name & Number**
San Juan 28-6 U #6
9. **API Well No.**
30-039-07048
10. **Field and Pool**
Blanco Mesa Verde
11. **County and State**
Rio Arriba Co, NM

12. **CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA**

Type of Submission	**Type of Action**	
_X_ Notice of Intent	___ Abandonment	___ Change of Plans
	___ Recompletion	___ New Construction
___ Subsequent Report	___ Plugging Back	___ Non-Routine Fracturing
	___ Casing Repair	___ Water Shut off
___ Final Abandonment	___ Altering Casing	___ Conversion to Injection
	_X_ Other - Sidetrack workover	

13. **Describe Proposed or Completed Operations**

It is intended to workover the subject well in the following manner:

TOOH w/tbg. If tbg is stuck, cut off tbg approximately 100' below csg shoe. Set cmt retainer near bottom of 7" csg. TIH w/2 3/8" tbg, CO. Sting into ret. Test tbg to 2500 psi. Sting all the way through ret, load backside w/wtr, PT 500 psi. Squeeze open hole w/cmt. Pull out of retainer. Spot cmt on top of retainer. Pull up one joint, reverse excess cmt out. Run CBL. Perf squeeze holes above TOC. Squeeze cmt to 50'above Ojo Alamo. Drill to 10' below 7" csg shoe. Sidetrack using a downhole motor. Drill to approximately 6000'. Run a full string of 4 1/2" csg & cmt. Selectively perf and frac the Mesa Verde formation and return well to production.

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

Signed _____ (KAS)Title Regulatory Affairs Date 7/15/94

(This space for Federal or State Office use)
APPROVED BY _____ Title _____ Date _____
CONDITION OF APPROVAL, if any:

APPROVED
JUL 28 1994
DISTRICT MANAGER

NMOCD