UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT



070 170 15. 1 **Lease Number** SF-079492B 6. If Indian, All. or 1. Type of Well GAS Tribe Name 7. Unit Agreement Name 2. Name of Operator MERIDIAN OIL San Juan 27-5 Unit 8. Well Name & Number 3. Address & Phone No. of Operator San Juan 27-5 U #157 9. API Well No. PO Box 4289, Farmington, NM 87499 (505) 326-97(0 30-039-20676 10. Field and Pool 4. Location of Well, Footage, Sec., T, R, M 1090'FSL, 1600'FEL, Sec.24, T-27-N, R-5-W, NMPM Tapacito Pictured Cliff 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 ___ Change of Plans ___ Notice of Intent _X_ Abandonment Recompletion New Construction
Plugging Back Non-Routine Fracturing
Casing Repair Water Shut off
Altering Casin Conversion to Injection X Subsequent Report Final Abandonment Other -13. Describe Proposed or Completed Operations 7-8-96 MIRU. ND WH. NU BOP. TIH w/103 jts 1 1/4" tbg to 2900'. SDON. 7-9-96 Plug #1: pump 10 sx Class "B" cmt @ 3(00' on top existing CIBP @ 3300'. Displace w/5.4 bbl wtr. TOOH. TIH w/gauge ring to 1180'. TOOH. TIH w/2 7/8" csg scrape Circ well w/20 bbl wtr. SDON. 7-10-96 TOOH. TIH w/gauge ring to 2870'. Perf 2 sqz holes @ 2870'. TOOH. TIH w/cmt retainer, set @ 2832'. Establish irjection. Plug #2: pump 35 sx Class "B" cmt outside csg, pump 5 sx Class "B" cmt above cmt retainer. TOOH. TIH, perf 2 sq holes @ 1860'. TOOH. TIH w/cmt retainer, set @ 1812'. Establish injection. Pump 35 sx Class "B" cmt outside csg. Pump 5 sx Class "B" cmt above cmt retainer. TOOH. TIH, perf 2 sqz holes @ 175'. Establish circ down csg & out bradenhead. Plug #4: pump 75 sx Class "B" cmt down csg & out bradenhead. Circ 1 bbl cmt to surface. ND BOP. Cut cff WH. Pump 1 sx Class "B" cmt to fill csg Install dry hole marker w/10 sx Class "B" cmt. RD. Rig released. Well plugged and abandoned 7-10-96. I hereby centify that the foregoing is true and correct. Machaeld Title Regulatory Administrator Date 7/17/96____ (This space for Federal or State Office use) APPROVED BY ____Title ____ Date CONDITION OF APPROVAL, if any:

APPROVED

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