

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO.	
2. NAME OF OPERATOR Meridian Oil Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 4289 Farmington, New Mexico 87499		7. UNIT AGREEMENT NAME San Juan 27-4 Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1820'N, 1820'E		8. FARM OR LEASE NAME San Juan 27-4 Unit	
14. PERMIT NO.		9. WELL NO. 87	
15. ELEVATIONS (Show whether DF, HT, GR, etc.) 7097' GL		10. FIELD AND POOL, OR WILDCAT Tapacito Picutred Cliff	
		11. SEC., T., S., M., OR BLK. AND SUBSECT OR AREA Sec. 28, T27N, R4W NMPM	
		12. COUNTY OR PARISH Rio Arriba	
		13. STATE NM	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.)\*

Ran 122 jts 1 1/4" tbgs set @ 3923.25'. Baker Model C invertible Packer set @ 3811' in 5000# compression.

RECEIVED

APR 03 1990

OIL CON. DIV.  
DIST. 3

Accepted for Record

MAR 27 1990

Wk

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

SIGNED [Signature]

TITLE Regulatory Affairs

DATE October 31, 1989

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

NMOC