Form 3160-5 (November 1983) (Formerly 9-331)	UNITED STATES EPARTMENT OF THE INTER BUREAU OF LAND MANAGEMEN		5. LEASE DESIGNATION AND SERIAL NO. SF-078416
SUNDR'	Y NOTICES AND REPORTS (for proposals to drill or to deepen or plug to "APPLICATION FOR PERMIT—" for such p	ON WELLS	6. IF INDIAN, ALLOTTER OR TRIBE NAME
OIL GAR XELL X	OTHER	AS 14분 - 나 PH 1:50	7. UNIT AGREEMENT HAME
2. NAME OF OPERATOR		an ent uF	S. FARM OR LEASE NAME
M	eridian Oil Inc.	SANSKUTUS BY THE VIEW OF THE VIEW	Hardie A
3. ADDRESS OF OPERATOR		PARMINGTON	9. WELL NO.
	ost Office Box 4289,Fa		211
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) 790 N, 1840 W			10. FIELD AND POOL, OR WILDCAT
			Basin Fruitland Coal
			11. SEC. T., R., M., OR BLE. AND SURVEY OR ASSA Sec. 26, T-29-N, R-08-W
14. PERMIT NO.	15. ELEVATIONS (Show whether of	ET. CR. etc.)	N.M.P.M.
11, FBBMIL NO.		369'GL	San Juan NM
16.	heck Appropriate Box To Indicate N		
NOTICE OF INTENTION TO:			TENT REPORT OF:
TEST WATER SHUT-OFF	PELL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	PRACTURS TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON®	SHOOTING OR ACIDIZING	*THEMNODIKARA
REPAIR WELL	CHANGE PLANS	(Other)	Spud Well of multiple completion on Well
(Other)	PLETED OPERATIONS (Clearly state all pertinen	Completion or Recompl	etion Report and Log form.)
proposed work. If well nent to this work.) *	is directionally drilled, give subsurface locat	ions and measured and true vertice	including estimated date of starting any
12-20-88	Spudded well at 12:1 jts. 9 5/8", 32.3#, Cemented with 150 sk 3% calcium chloride WOC 12 hrs. Tested	H-40 surface casing s. Class "B" with (177 cu.ft.). circ	ng set at 223'. 1/4#/sk. gel-flake and culated to surface.
12-23-88	2979' set @ 2990'.	Cemented with 410 ium chloride, 1/2 100 sx. Class "B"	5 intermediate casing, sks. Class "B" 65/35 cu.ft. perlite/sx (791 "with 2% calcium Held 1200#/30 min.
18. I hereby certify that the f	Oregoing is true and correct Middfuld TITLE R	egulatory Affairs	01-03-88
STOREM STATE			

*See Instructions on Reverse Side

William Res

TITLE __

DATE _

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(This space for Federal or State office use)