

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

<p>1. Type of Well GAS</p> <hr/> <p>2. Name of Operator Meridian Oil Inc.</p> <hr/> <p>3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec., T, R, M 1580'FSL, 1760'FEL Sec.34, T-30-N, R-8-W, NMPM</p>	<p>5. Lease Number SF-078385A</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name</p> <p>8. Well Name & Number Howell L #302</p> <p>9. API Well No. 30-045-</p> <p>10. Field and Pool Basin Ft Coal</p> <p>11. County and State San Juan Co, NM</p>
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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 type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other -	

13. Describe Proposed or Completed Operations

This well will be disconnected from the pipeline and all surface production equipment will be removed upon the successful completion of the replacement well, the Howell L #304. The Fruitland Coal reservoir pressure will be periodically monitored in the Howell L #302.

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OIL CON. DIV.
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52 OCT 30 PM 2:37
BLM, N.M.

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

Signed [Signature] (JK) Title Regulatory Affairs Date 10/27/92

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date NOV 03 1992

CONDITION OF APPROVAL, if any:

APPROVED
Date NOV 03 1992
AREA MANAGER

NMOGD