

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
MAR 5 1990
10:28 AM

Sundry Notices and Reports on Wells

1. Type of Well
GAS

2. Name of Operator *Meridian Oil*
~~El Paso Natural Gas Company~~

3. Address & Phone No. of Operator
Box 4289, Farmington, NM 87499 (505) 326-9700

4. Location of Well, Footage, Sec, T, R, M.
2100'N, 100'E Sec. 27, T-32-N, R-5 W, NMPM

5. Lease Number
SF-079011A

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name
San Juan 32-5 Unit

8. Well Name & Number
San Juan 32-5 Unit 108

9. API Well No.

10. Field and Pool
Basin Fruitland Coal

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	
<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 checked="" type="checkbox"/> Other	

13. Describe Proposed or Completed Operations

Please show the following revisions on the well completion report

Type electric and other logs run: IEL, SDL-DSN-II, HRL-SDL, CSNGT

Pictured Cliffs not penetrated. TD at 3161'.

RECEIVED

MAR 26 1990

OIL CON. DIV.
DIST. 3

Accepted For Record
MAR 21 1990
M
District Director
Bureau of Land Management
Patagonia Resource Area

14. I hereby certify that the foregoing is true and correct
Signed *Duffy Stoddard* Title Regulatory Affairs Date 2-28-90

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITION OF APPROVAL, IF ANY: NMCOOD

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
MAIL ROOM

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RECEIVED
MAR 21 1990
OIL CON. DIV.
DIST. 2

Accepted For Record
MAR 21 1990
Chief, Branch of
Mineral Resources
Farmington Resource Area

14. I hereby certify that the foregoing is true and correct
Signed *[Signature]* Title Regulatory Affairs Date 2-28-90

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITION OF APPROVAL, IF ANY: