

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well GAS	5. Lease Number SF-078604
2. Name of Operator MERIDIAN OIL	6. If Indian, All. or Tribe Name
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700	7. Unit Agreement Name
4. Location of Well, Footage, Sec., T, R, M 1180'FSL, 1690'FEL Sec 8, T-31-N, R-10-W, NMPM	8. Well Name & Number Marcott #1A
	9. API Well No.
	10. Field and Pool Blanco Mesa Verde
	11. County and State San Juan Co, NM

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

Type of Submission	Type of Action
<input checked="" 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 checked="" 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

It is intended to shut off the gas flow out of the bradenhead valve per the attached procedure and wellbore diagram.

RECEIVED
AUG 24 1993
OIL CON. DIV.
DIST. 3

RECEIVED
BLM
03 AUG 17 PM 3:45
070 FARMINGTON, NM

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

Signed [Signature] (TJM) Title Regulatory Affairs Date 8/16/93

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

CONDITION OF APPROVAL, if any:

APPROVED
Date AUG 19 1993
[Signature]
DISTRICT MANAGER

NMOCD