

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well GAS	5. Lease Number NM-01594 6. If Indian, All. or Tribe Name 7. Unit Agreement Name 8. Well Name & Number San Juan 32-9 Unit San Juan 32-9 U 92 9. API Well No.
2. Name of Operator MERIDIAN OIL	10. Field and Pool Blanco PC 11. County and State San Juan Co, NM
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700	
4. Location of Well, Footage, Sec., T, R, M 1000'FNL, 1 650'FEL Sec.14, T-31-N, R-10-W, NMPM	

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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other -
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

This well was returned to production 10-01-93 and produced 35 mcf. Minor production problems are being remediated at this time.

RECEIVED
DEC - 6 1993
OIL CON. DIV.
DIST. 3

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

Signed *Ray Stapp* (GL) Title Regulatory Affairs Date 11/30/93

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

CONDITION OF APPROVAL, if any: _____

ACCEPTED FOR RECORD
Date _____

DEC 01 1993

FARMINGTON DISTRICT OFFICE

NMOCD

BY *Sum*