

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

JUL 15 1991

Sundry Notices and Reports on Wells

ON CON. DIV. J
DIST. 3

- | | |
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| <p>1. Type of Well
GAS</p> <p>2. Name of Operator
Meridian Oil Inc.</p> <p>3. Address & Phone No. of Operator
Box 4289, Farmington, NM 87499 (505) 326-9700</p> <p>4. Location of Well, Footage, Sec, T, R, M.
800' N, 1080' W Sec. 25, T-31-N, R-13-W, NMPM</p> | <p>5. Lease Number
SF-078464</p> <p>6. If Indian, All. or
Tribe Name</p> <p>7. Unit Agreement Name</p> <p>8. Well Name & Number
Federal A #3</p> <p>9. API Well No.</p> <p>10. Field and Pool
Flora Vista Gallup</p> <p>11. County and State
San Juan County, NM</p> |
|--|--|
12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA
- | Type of Submission | Type of Action | |
|---|---|--|
| ☐ Notice of Intent | ☒ Abandonment | ☐ Change of Plans |
| ☐ Subsequent Report | ☐ Recompletion | ☐ New Construction |
| ☒ Final Abandonment | ☐ Plugging Back | ☐ Non-Routine Fracturing |
| | ☐ Casing Repair | ☐ Water Shut Off |
| | ☐ Altering Casing | ☐ Conversion to Injection |
| | ☐ Other | |

13. Describe Proposed or Completed Operations

- 07-10-91 MOL&RU. Kill well w/80 BW. ND WH. NU BOP. TOO H w/tbg. SDFN.
- 07-11-91 Kill w/wtr. TOO H w/2 3/8" tbg. Set cmt ret @ 5698'. PT 500#, ok. Cmt w/60 sx Class "B" neat cmt through retainer. Sting out of retainer. Dump 10 sx on top of retainer. Reverse circ clean. Load hole w/ 90 bbl. 9# 50 vis mud. TOO H w/stinger. Perf 2 holes @ 5120'. TIH to 5122'. Cmt w/60 sx Class "B" neat. Pull tbg to 4300'. Displace 40 sx cmt out squeeze holes. Left 20 sx in csg. Pull up to 3679'. Reverse circ tbg clean. SDFN.
- 07-12-91 Tag plug @ 4735'. Spot 20 sx cmt plug 3678-3415'. Pull up to 2144'. Spot 20 sx cmt plug 2144-1881'. Pull tbg to 1667'. Spot 20 sx cmt plug 1667-1404'. Pull tbg to 353'. Spot 13.5 sx cmt plug. Perf 4 holes @ 200'. Cmt w/85 sx Class "B" neat cmt, circ out bradenhead. ND BOP. Cut off WH. Install dry hole marker. Release rig.

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

Signed [Signature] Title Regulatory Affairs Date 7-15-91

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

CONDITION OF APPROVAL, IF ANY: _____

