

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 <b>MERIDIAN OIL</b></p> <hr/> <p>3. Address &amp; Phone No. of Operator Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec., T, R, M 1920'FNL, 850'FWL, Sec.19, T-32-N, R-6-W, NMPM</p>	<p>5. Lease Number SF-081155</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name  Allison Unit</p> <p>8. Well Name &amp; Number Allison Unit #142</p> <p>9. API Well No. 30-045-29195</p> <p>10. Field and Pool Basin Fruitland 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 checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment <input checked="" 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

It is intended to run 5 1/2" 15.5# K-55 csg in the subject well instead of the 4 1/2" csg stated in the Application for Permit to Drill.

RECEIVED  
NOV - 8 1994  
OIL CON. DIV.  
DIST. 2

APPROVED  
NOV 03 1994  
DISTRICT MANAGER

NOV 10 1994  
 11:25 AM  
 DISTRICT OFFICE

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

Signed *Debra Bradfield* Title Regulatory Affairs Date 10/28/94

(This space for Federal or State Office use)  
 APPROVED BY \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
 CONDITION OF APPROVAL, if any:

~~ACCEPTED FOR RECORD~~  
~~NOV 08 1994~~  
~~FARMINGTON DISTRICT OFFICE~~  
 BY ~~\_\_\_\_\_~~