

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR Meridian Oil Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Contract 126
3. ADDRESS OF OPERATOR P.O. Box 4289, Farmington, NM 87499		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 790' FNL, 790' FEL		8. FARM OR LEASE NAME Jicarilla 126 S
14. PERMIT NO.		9. WELL NO. 15
15. ELEVATIONS (Show whether DF, ST, GR, etc.) 6830' GL		10. FIELD AND POOL, OR WILDCAT West Lindrith Gallup-Dakot
		11. SEC., T., R., M., OR S.E. AND SURVEY OR AREA Sec. 11, T24N, R4W N.M.P.M.
		12. COUNTY OR PARISH Rio Arriba
		13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	CELL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>
(Other) Uphole Recompletion		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

It is intended to plug the producing Gallup-Dakota zone and recomplete the Fruitland Coal Formation in the following manner:

MOL & RU. TOOH with rods and tubing. TIH with workstring. Set cmt. retainer @ 6230'. Squeeze with 205 sx. class B neat cement. Run GR-CCL. Perforate 2/SPF @ 2906'-2915'; 2923'-2926'; 2928'-2933' and 2974'-2981'. Frac with 65,000# sand and 80,000 gals. 30# gel. CO to PBTD. Run 1 1/4" tubing to 2925'. RD & MOL.

Work will be performed as soon as contract negotiations with Northwest Pipeline are complete.

RECEIVED
JAN 31 1984
OIL CON

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

SIGNED Christopher J. Settle TITLE Production Engineer (CS) DATE 1-26-89

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side