

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	2. NAME OF OPERATOR Meridian Oil Inc.	3. ADDRESS OF OPERATOR Post Office Box 4289, Farmington, NM 87499	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1650'S, 1075'E	5. LEASE DESIGNATION AND SERIAL NO. Jic. Apache #66	6. IF INDIAN, ALLOTTED OR TRIBE NAME	7. UNIT AGREEMENT NAME	8. FARM OR LEASE NAME Jicarilla B	9. WELL NO. 15	10. FIELD AND POOL, OR WILDCAT S. Blanco Pic. Cliffs	11. SEC., T., S., M., OR S.E. AND SURVEY OR AREA Sec. 33, T-25-N, R- 4-W N.M.P.M.	12. COUNTY OR PARISH Rio Arriba	13. STATE NM
14. PERMIT NO.	15. ELEVATIONS (Show whether OF, ST, OR, etc.) 6036' GL											

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or Recupriation 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 and abandon this location in the following manner:
Move on location and rig up.
Circulate hole w/9# mud (1 sx. gel/4 bbls.wtr).
Spot a 15 cu.ft. cmt. plug w/2% calcium chloride across perfs to cover from 3259-2815' inside 2 7/8" tbg. across Fruitland at 2865'.
Tag bottom plug w/strapped work string to verify depth down tbg. TOOH and lay down tbg.
Perforate 2 squeeze holes 2685' and squeeze 60 cu.ft. cement plug to cover 2560-2785' across Ojo Alamo @ 2610'.
Fill 2560' to 190' w/approximately 13 bbls. 9# mud.
Wireline. Perforate 2 7/8" casing @ 190'. Circulate cement back to surface in 8 5/8" - 2 7/8" annulus using 55 cu.ft. cement. Cut off wellhead and set dry hole marker.

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

SIGNED Peggy Dosh TITLE Drilling Clerk

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

DATE 09-18-87

*See Instructions on Reverse Side