

**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 Meridian Oil Inc. <i>Southland Royalty Co.</i></p> <hr/> <p>3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec., T, R, M 1550'FNL, 1750'FWL Sec.35 T-25-N, R-4-W, NMPM</p>	<p>5. Lease Number Jic.Contract 125</p> <p>6. If Indian, All. or Tribe Name Jicarilla Apache</p> <p>7. Unit Agreement Name</p> <p>8. Well Name & Number Arizona Jicarilla 1</p> <p>9. API Well No. 30-039-</p> <p>10. Field and Pool S.Blanco PC</p> <p>11. County and State Rio Arriba Co, NM</p>
---	---

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 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 checked="" type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other -	

13. Describe Proposed or Completed Operations

Additional Pictured Cliffs pay will be added and the subject well returned to production within 365 days.

RECEIVED

DEC 10 1992

OIL CON. DIV
DIST. 3

THIS APPROVAL EXPIRES DEC 07 1993

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

Signed *[Signature]* (TEM) Title Regulatory Affairs Date 12/3/92

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

APPROVED

DEC 08 1992

AREA MANAGER