

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.</p> <hr/> <p>3. Address & Phone No. of Operator Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec, T, R, M. 990'N, 1685'E Sec.12, T-26-N, R-5-W, NMPM</p>	<p>5. Lease Number Jic.Contract 150</p> <p>6. If Indian, All.or Tribe Name Jic.Apache</p> <p>7. Unit Agreement Name</p> <hr/> <p>8. Well Name & Number Jicarilla G #10</p> <p>9. API Well No.</p> <hr/> <p>10. Field and Pool Blanco MV/Basin Dk</p> <p>11. County and State Rio Arriba County, 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 type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other - commingle	

13. Describe Proposed or Completed Operations

It is intended to down hole commingle the subject dual completion per the New Mexico Oil Conservation Division Order # DHC-823.

The procedure for the work is as follows:

TOOH w/both strings of tbg. Mill up the packer set @ 8041'. TIH w/one string of tbg and return well to production.

RECEIVED
DEC 17 1991
OIL CON. DIV.
DCL 3

RECEIVED
BLM
31 DEC 12 PM 3:59
FARMINGTON, NM

14. I hereby certify that the foregoing is true and correct
Signed Peggy Bradfield Title Regulatory Affairs Date 12-10-91

APPROVED

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITION OF APPROVAL, IF ANY: _____

DEC 18 1991
DATE
AREA MANAGER