

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well
GAS
2. Name of Operator
MERIDIAN OIL
3. Address & Phone No. of Operator
PO Box 4289, Farmington, NM 87499 (505) 326-9700
4. Location of Well, Footage, Sec., T, R, M
1890'FSL, 860'FEL, Sec.29, T-26-N, R-6-W, NMPM
5. Lease Number
SF-079266
6. If Indian, All. or
Tribe Name
7. Unit Agreement Name
8. Well Name & Number
Vaughn #31E
9. API Well No.
30-039-23963-23936
10. Field and Pool
Blanco MV/Basin DK
11. County and State
Rio Arriba Co, NM

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

Type of Submission	Type of Action	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" 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 - Commingling	

13. Describe Proposed or Completed Operations

4-7-95 MIRU. ND WH. NU BOP. TOO H w/ tbq. TIH, drill BP. TOO H. TIH w/tbq. ND BOP.
NU WH. RD. Rig released.

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

Signed [Signature] Title Regulatory Affairs Date 4/7/95

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

APR 11 1995

NMOCD

FARMINGTON DISTRICT OFFICE

BY [Signature]