

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

RECEIVED
BLM

Sundry Notices and Reports on Wells

95 MAY 17 PM 2:59

1. **Type of Well**
GAS

070 FARMINGTON, NM

5. **Lease Number**
SF-079265

6. **If Indian, All. or
Tribe Name**

2. **Name of Operator**
MERIDIAN OIL

7. **Unit Agreement Name**

3. **Address & Phone No. of Operator**
PO Box 4289, Farmington, NM 87499 (505) 326-9700

8. **Well Name & Number**
Klein #28E

9. **API Well No.**
30-039-23937

4. **Location of Well, Footage, Sec., T, R, M**
1190' FNL, 1590' FWL, Sec. 33, T-26-N, R-6-W, NMPM

10. **Field and Pool**
Ensenada Gallup/
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

☐ Notice of Intent	☐ Abandonment	☐ Change of Plans
☒ Subsequent Report	☐ Recompletion	☐ New Construction
☐ Final Abandonment	☐ Plugging Back	☐ Non-Routine Fracturing
	☐ Casing Repair	☐ Water Shut off
	☐ Altering Casing	☐ Conversion to Injection
	☒ Other - Commingle	

13. Describe Proposed or Completed Operations

4-21-95 MIRU. ND WH. NU BOP. TOOH w/2 3/8" tbg. SDON.
4-24-95 TIH, drilled out fill @ 7115-7170'. Drill through CIBP. Push junk to bottom @ 7343'. Circ hole clean. TOOH to 6204'. SDON.
4-25-95 TOOH. TIH w/production tbg, landed @ 7300'. ND BOP, NU WH. RD. Rig released.

RECEIVED
MAY 24 1995
OIL CON. DIV.
DIST. 3

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

Signed *James D. Adkins* Title Regulatory Affairs Date 5/15/95

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____
CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

MAY 19 1995

FARMINGTON DISTRICT OFFICE
BY *MT*

NMOC

CMD :
OG6WCMP

ONGARD
C104-AUTHORIZATION TO TRANSPORT

07/13/95 08:06:58
OGODJ -EME5

OGRID Idn : 14538 API Well No : 30 ~~29~~ 23937 Pool Code : 71599
Operator Name : MERIDIAN OIL INC
Prop Name : ~~XXXXXXXXXX~~ Well No : ~~028E~~ *DAK*
B.H. Location: UL : C Sec : 33 Twp : 26N Range : 06W Lot Idn :
Prod Method (F/P) : F C104 Aprvl Dte : Gas Conn Dte :
NFO Permit No : NFO Eff Dte : NFO Exp Date :
Remove POD from WC: N Remove Transporter from POD : N
Sel:

Transporter Idn : 14538 Name : MERIDIAN OIL INC
Point of Disp : ~~1876430~~ Transporter type (G/O/W): O Eff Dte : 01/01/1940
Transporter Idn : 7057 Name : EL PASO NATURAL GAS CO
Point of Disp : ~~1876430~~ Transporter type (G/O/W): G Eff Dte : 01/01/1940
Transporter Idn : Name :
Point of Disp : ~~1876450~~ Transporter type (G/O/W): Eff Dte :
Production Test : First Oil Prod Dte : 02-01-1986 Gas Dlv Date: 02-01-1986
Test Date : Tubing Pressure : Choke Size :
Oil(BOPD) : Gas(MCFD) : Water(BPD) :
AOF(MCFD) :

E0005: Enter data to modify or PF keys to scroll

PF01 HELP	PF02	PF03 EXIT	PF04 GoTo	PF05	PF06 CONFIRM
PF07	PF08	PF09 PRINT	PF10	PF11	PF12 NEX

*Deleted 6A1 pods & gave 1 set pods
Well has been changed*

OIL CONSERVATION DIVISION

State of New Mexico
Energy, Minerals and Natural Resources Department

Submit 3 Copies
to Appropriate
District Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Artesia, NM 87410

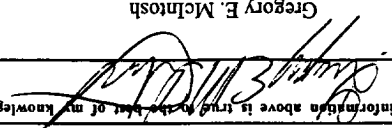
Santa Fe, New Mexico 87504-2088

P.O. Box 2088

WELL API NO. 30-045-27167		5. Indicate Type of Lease STATE ☒ FEE ☐		6. State Oil & Gas Lease No. B-10894-11	
7. Lease Name or Unit Agreement Name Jake Johnson		8. Well No. 1		9. Pool name or Wildcat Bisti Lower Gallup	
1. Type of Well: ☒ OIL ☐ GAS ☐ OTHER		2. Name of Operator Giant Exploration & Production Company		3. Address of Operator P.O. Box 2810, Farmington, New Mexico 87499	
4. Well Location Unit Letter L : 1650 Feet From The South Line and 990 Feet From The West Line Section 32 Township 125N Range R11W NMPM San Juan County		10. Elevation (Show whether DF, RKB, RT, CR, etc.)		11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.		13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.		14. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.	

The existing Gallup perforation were fracture treated on the subject well as follows:

6/7/95 Well frad with 51,000# 20/40 sand and 346 barrels crosslinked gel.
6/13/95 Well returned to production.

I hereby certify that the information above is true to the best of my knowledge and belief.		SIGNATURE 		TITLE Area Engineer	
TYPE OR PRINT NAME Gregory E. McIntosh		TELEPHONE NO. (505)326-3325		DATE JUL 0 6 1995	
APPROVED BY		TITLE		DATE	
CONDITIONS OF APPROVAL, IF ANY:					