

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 PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec., T, R, M 2380' FSL, 1585' FWL Sec. 13, T-27-N, R-6-W, NMPM</p>	<p>5. Lease Number SF-079365</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name San Juan 28-6 Unit</p> <p>8. Well Name & Number San Juan 28-6 U #426</p> <p>9. API Well No. 30-039-25231</p> <p>10. Field and Pool Basin Frt Coal</p> <p>11. County and State Rio Arriba Co, NM</p>
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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 type="checkbox"/> Other -	

13. Describe Proposed or Completed Operations

10-29-92 TD 3076'. Ran 72 jts 4 1/2", 10.5#, K-55 csg, 3064' set @ 3076'. Cemented first stage w/83 sx Class "G" 65/35 Poz w/6% gel, 2% calcium chloride, 5# gilsonite/sx and 0.25#/sx flocele (147 cu.ft.), tailed w/80 sx Class "G" w/2% calcium chloride (92 cu.ft.). Cemented second stage w/462 sx Class "G" 65/35 Poz w/6% gel, 2% calcium chloride, 5#/sx gilsonite and 0.25#/sx flocele (818 cu.ft.), tailed w/100 sx Class "G" w/2% calcium chloride (115 cu.ft.). Circulated 42 bbl. to surface. DV tool @ 2602'. Insert float @ 3076'.

RECEIVED

NOV 5 1992

OIL CON. DIV.

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

Signed *[Signature]* Title Regulatory Affairs Date 10/29/92

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD
Date _____

NOV 9 1992

NMOCD

FARMINGTON RESOURCE AREA
BY *[Signature]*