

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
990' FSL, 990' FWL Sec. 29, T-28-N, R-4-W, NMPM

5. Lease Number
NM-03863

6. If Indian, All. or Tribe Name

7. Unit Agreement Name

8. Well Name & Number
San Juan 28-4 Unit

9. API Well No.
San Juan 28-4 U #15

10. Field and Pool
Blanco Mesa Verde

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 checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other - add bypassed zones
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

The subject well is currently inactive. The well has bypassed pay zones in the Mesa Verde formation. The well is being evaluated for a project to add these bypassed zones to the existing Mesa Verde. Should this evaluation prove economic, a sundry will be submitted defining the proposed payadd procedure. The work will then be scheduled shortly after.

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

Signed [Signature] (KS) Title Regulatory Affairs Date 2/2/94

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

CONDITION OF APPROVAL, if any: _____

APPROVED

FEB 09, 1994

DISTRICT MANAGER

NMOCD