

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
BLM

Sundry Notices and Reports on Wells

50 OCT 29 AM 9:33

1. Type of Well
GAS

RECEIVED

NOV 8 1993

2. Name of Operator
MERIDIAN OIL

OIL CON. DIV.
DIST. 3

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

4. Location of Well, Footage, Sec., T, R, M
1500' FSL, 1650' FWL Sec 29, T-28-N, R-5-W, NMPM

5. Lease Number

070 SF-079521A

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

San Juan 28-5 Unit
8. Well Name & Number

San Juan 28-5 U 9

9. API Well No.

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

☒ 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 - sidetrack workover

13. Describe Proposed or Completed Operations

It is intended to workover the subject well in the following manner:

TOOH w/tbg. If tbg is stuck, cut off tbg approximately 100' below csg shoe. Set cmt ret near bottom of 7" csg. TIH w/2 3/8" tbg, CO. Sting into ret. Test tbg to 2500 psi. Sting all the way through ret, load backside w/wtr. PT 500 psi. Squeeze open hole w/cmt. Pull out of ret. Spot cmt on top of ret. Pull up one joint, reverse excess cmt out. Run CBL. Perf squeeze holes above TOC. Squeeze cmt to 50' above Ojo Alamo. Drl to 10' below 7" csg shoe. Sidetrack using a downhole motor. Drill to approximately 6000'. Run a full string of 4 1/2" csg and cmt. Selectively perf and frac the Mesa Verde formation and return well to production.

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

Signed [Signature] (KS) Title Regulatory Affairs Date 10/28/93

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

CONDITION OF APPROVAL, if any:

APPROVED

Date

NOV 8 1993

DISTRICT MANAGER

MAJCC