

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

94 JAN 24 AM 10:51

1. Type of Well  
GAS

RECEIVED  
FEB 1 0 1994

070 FARMINGTON, NM  
5. Lease Number  
SF-079520

6. If Indian, All. or  
Tribe Name

2. Name of Operator  
MERIDIAN OIL

BLM CON. DIV.  
DIST. 3

7. Unit Agreement Name

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

8. Well Name & Number  
San Juan 28-5 Unit  
San Juan 28-5 U 37  
9. API Well No.

4. Location of Well, Footage, Sec., T, R, M  
1650' FSL, 800' FWL Sec. 24, T-28-N, R-5-W, NMPM

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

☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment

Type of Action

☐ Abandonment ☐ Change of Plans  
☐ Recompletion ☐ New Construction  
☐ Plugging Back ☐ Non-Routine Fracturing  
☐ Casing Repair ☐ Water Shut off  
☐ Altering Casing ☐ Conversion to Injection  
☒ Other - add bypassed pay

13. Describe Proposed or Completed Operations

Revised

It is intended to perforate and fracture stimulate the following intervals of the Mesa Verde group. These zones were bypassed during the original completion of the well and are all located below the Huerfanito Bentonite @ 4871'. The tubing will be pulled from the well. A bridge plug will be set @ 6736' above the Pt. Lookout. Selected intervals from 6114-6366' will be perforated and fracture stimulated. A bridge plug will be set @ 6196'. Selected intervals from 6006-6176' will be perforated and fracture stimulated. A bridge plug will be set @ 5500'. Selected intervals from 5005-5405' will be perforated and fracture stimulated. The bridge plugs will be retrieved from the well, the tubing will be run back in the well, and the well will be restored to production.

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

Signed [Signature] (KS) Title Regulatory Affairs Date 1/24/94

(This space for Federal or State Office use)  
APPROVED BY \_\_\_\_\_ Title \_\_\_\_\_  
CONDITION OF APPROVAL, if any:

APPROVED

DATE 07 1994

DISTRICT MANAGER

NMOCD