

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

<p>1. Type of Well GAS</p>	<p>5. Lease Number SF-079727A</p>
<p>2. Name of Operator MERIDIAN OIL</p>	<p>6. If Indian, All. or Tribe Name</p>
<p>3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700</p>	<p>7. Unit Agreement Name</p>
<p>4. Location of Well, Footage, Sec., T, R, M 1075'FSL, 800'FEL Sec.12, T-28-N, R-4-W, NMPM</p>	<p>8. Well Name & Number San Juan 28-4 U #7</p>
	<p>9. API Well No.</p>
	<p>10. Field and Pool Pic.Cliffs</p>
	<p>11. County and State Rio Arriba Co, NM</p>

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 checked="" type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input 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 Injectio
	<input type="checkbox"/> Other	

13. Describe Proposed or Completed Operations

The subject well will be plugged & abandoned within 365 days. A procedure and wellbore diagram will be submitted..

RECEIVED
FEB 11 1994
OIL CON. DIV
DIST. 3

RECEIVED
BLM
94 FEB -7 AM 9:47
070 FARMINGTON, NM

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

Date

FEB 09 1994

DISTRICT MANAGER