

**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</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 1150'FNL, 592'FWL Sec.33, T-27-N, R-10-W, NMPM</p>	<p>5. Lease Number SF-078233</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name Huerfano Unit</p> <p>8. Well Name & Number Huerfano Unit 82</p> <p>9. API Well No.</p> <p>10. Field and Pool Kutz Pic.Cliffs</p> <p>11. County and State San Juan Co, NM</p>
--	---

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

Type of Submission

Type of Action

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

13. Describe Proposed or Completed Operations

This well was returned to production November 1993

RECEIVED
MAR 17 1994
CON. DIST. 3

RECEIVED
EIM

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

Signed *[Signature]* (SBD) Title Regulatory Affairs ACCEPTED FOR RECORD

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

CONDITION OF APPROVAL, if any:

MAR 1 1994
Date

FARMINGTON DISTRICT OFFICE
BY *[Signature]*