

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
420' FSL, 400' FEL, Sec.14, T-27-N, R-10-W, NMPM

5. Lease Number
SF-079596

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
Morris #3

9. API Well No.
30-045-06446

10. Field and Pool
Fulcher Kutz Pict.Cliffs

11. County and State
San Juan 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"/> 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 Injection
	<input checked="" type="checkbox"/> Other -	

13. Describe Proposed or Completed Operations

Meridian Oil Inc respectfully requests a six month extension for the subject well.
The well will have compression installed in the last quarter of 1995.

THIS APPROVAL EXPIRES DEC 31 1995

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

Signed [Signature] (LWD2) Title Regulatory Affairs Date 5/22/95

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

APPROVED

MAY 25 1995

DISTRICT MANAGER

