

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
BLM

Sundry Notices and Reports on Wells

96 JUN 27 PM 2: 15

1. Type of Well
GAS

070 FARMINGTON, NM

- 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

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' FWL, Sec.14, T-27-N, R-10-W, NMPM

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 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

It is intended to enlarge the drilling pad of the subject well so a completion rig will fit on location. A copy of the new archeology report has been submitted to the Farmington BLM office.

[Faint, illegible stamp or handwritten notes]

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

Signed Nancy Oltmanns for (CDS1) Title Regulatory Administrator Date 6/27/96

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any: