

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well GAS	5. Lease Number SF-077382
2. Name of Operator Meridian Oil Inc.	6. If Indian, All.or Tribe Name
3. Address & Phone No. of Operator Box 4289, Farmington, NM 87499 (505)326-9700	7. Unit Agreement Name
4. Location of Well, Footage, Sec, T, R, M. 990'S, 1150'E Sec.16, T-27-N, R-10-W, NMPM	8. Well Name & Number Hargrave #3
	9. API Well No.
	10. Field and Pool Basin Fruitland Coal
	11. County and State San Juan County, NM
12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA	
Type of Submission	Type of Action
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut Off
	<input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

Please cancel our application for plugback and recompletion of this wellbore.

RECEIVED
SEP 04 1990
OIL CON. DIV.
DIST. 3

14. I hereby certify that the foregoing is true and correct
Signed Ray M. Madsen Title Regulatory Affairs Date 8-15-90

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITION OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

AUG 27 1990
DATE

FARMINGTON OFFICE AREA

BY MA