

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

RECEIVED
BLM

OCT 11 PM 3:21

Sundry Notices and Reports on Wells

070 FARMINGTON, NM

<p>1. Type of Well Gas</p> <hr/> <p>2. Name of Operator MERIDIAN OIL INC.</p> <hr/> <p>3. Address & Phone NO. of Operator P.O. Box 4289, Farmington, NM 87499 (505) 326 - 9700</p> <hr/> <p>4. Location of Well, Footage, Sec., T, R, M 890 FSL & 990 FEL SEC. 11, T 27 N, R 13 W</p>	<p>5. Lease Number SF-077972</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name</p> <p>8. Well Name & Number RICHARDSON #2</p> <p>9. API Well No.</p> <p>10. Field and pool BASIN DAKOTA</p> <p>11. County and State San Juan, NM</p>
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RECEIVED
OCT 17 1994
OIL CON. DIV.
DIST. 3

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"/> Re-completion
<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

Meridian Oil Inc. respectfully requests a 1 year extension for the Richardson #2. This extension will allow Meridian to install surface facilities and evaluate the wellbore for remedial work to recover potential reserves in place.

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

Signed

Title

Date

10-10-94

(This space for Federal or State Office use)

Approved By

Title

Date

CONDITION OF APPROVAL, IF ANY:

THIS APPROVAL EXPIRES NOV 01 1995

APPROVED

OCT 13 1994

DISTRICT MANAGER

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
MAIL ROOM

Sundry Notices and Reports on Wells

070 FARMINGTON, NM
JAN 23 1996

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

890' FSL, 990' FEL, Sec.11, T-27-N, R-13-W, NMPM

5. Lease Number
SF-0779726. If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
Richardson #29. API Well No.
30-045-0662110. Field and Pool
Basin Dakota11. 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

☒ Notice of Intent☐ Abandonment☐ Change of Plans☐ Subsequent Report☐ Recompletion☐ New Construction☐ Final Abandonment☐ Plugging Back☐ Non-Routine Fracturing☐ Casing Repair☐ Water Shut off☐ Altering Casing☐ Conversion to Injection☒ Other -

13. Describe Proposed or Completed Operations

It is intended to reconnect the subject well to the pipeline and install a compressor
by 3-15-96.

RECEIVED
JAN 23 1996
BUREAU OF LAND MGMT.
DIV. 3

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

Signed



(KKK2) Title Regulatory Administrator Date 2/14/96

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

Date _____

CONDITION OF APPROVAL, if any:

NMOC

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

RECEIVED
BLM MAIL ROOM
55 APR 11 PM 2:20

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
890' FSL, 990' FEL, Sec. 11, T-27-N, R-13-W, NMPM

5. Lease Number
SF-077972

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
Richardson #2

9. API Well No.
30-045-06621

10. Field and Pool
Basin Dakota

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 type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" 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. installed a compressor on the subject well. It was returned to production on 3-15-96 with an initial rate of 60 MCF/D.

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

Signed *Regina S. Shalheed* Title Regulatory Administrator Date 4/10/96

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

APR 12 1996

FARMINGTON DISTRICT OFFICE

BY *sm*

NMOCD