

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
990' FSL, 990' FEL, Sec.2, T-27-N, R-12-W, NMPM

5. Lease Number
NM-84078

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
Thompson #2

9. API Well No.
30-045-06807

10. Field and Pool
West 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 checked="" type="checkbox"/> Abandonment |
| <input 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

It is intended to plug and abandon the subject well. A procedure will be submitted by 4-1-96.

RECEIVED
DEC 11 1995
OIL CON. DIV.
BUREAU

OIL CON. DIV.
BUREAU
STEC-1 MTR:72
DEC 11 1995

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

Signed [Signature] (LWD2) Title Regulatory Administrator Date 12/1/95

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

APPROVED
DEC 11 1995
DISTRICT MANAGER

MAILED