

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well
GAS

RECEIVED
DEC 2 8 1992

2. Name of Operator
Meridian Oil Inc.

OIL CON. DIV
BOST ?

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. 4, T-27-N, R-10-W, NMPM

5. Lease Number
SF-077382
6. If Indian, All. or
Tribe Name
7. Unit Agreement Name
8. Well Name & Number
Hargrave #1
9. API Well No.
10. Field and Pool
Basin Ft Coal
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"/> 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

Meridian Oil intends to fracture stimulate the subject well in the 1993 calendar year in the attempt to establish production for this wellbore.

THIS APPROVAL EXPIRES JUL 01 1993

RECEIVED
BLM
92 DEC 15 AM 10:40
SILVER SPRING, N.M.

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

Signed [Signature] KAS) Title Regulatory Affairs Date 12/15/92

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

CONDITION OF APPROVAL, if any: _____

Date _____
APPROVED

DEC 21 1992

AREA MANAGER

NMOC