

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
BLM

Sundry Notices and Reports on Wells - 6 AM 9:49

070 FARMINGTON, NM

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'FNL, 990'FWL Sec.18, T-28-N, R-8-W, NMPM

5. Lease Number
SF-079205

6. If Indian, All. or Tribe Name

7. Unit Agreement Name

8. Well Name & Number
Sharp #1

9. API Well No.
30-045-

10. Field and Pool
Blanco Mesa Verde

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 type="checkbox"/> Abandonment |
| <input type="checkbox"/> Subsequent Report | <input checked="" type="checkbox"/> Recompletion |
| <input type="checkbox"/> Final Abandonment | <input type="checkbox"/> Plugging Back |
| | <input type="checkbox"/> Casing Repair |
| | <input type="checkbox"/> Altering Casing |
| | <input checked="" type="checkbox"/> Other - sidetrack workover |
| | <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 Injectio |

13. Describe Proposed or Completed Operations

It is intended to workover the subject well in the following manner and add the Chacra formation:

TOOH w/tbg. If tbg is stuck, cut tbg approximately 100' below csg shoe. Set cmt ret 1' above csg collar closest to 3250'. TIH w/2 3/8" tbg. CO. Sting into ret. PT tbg to 2500#. Sting all the way through retainer, load backside w/wtr. PT to 500#. Squeeze open hole w/cmt. Pull out of retainer. Spot cmt on top of retainer. Pull up one joint, reverse excess cmt out. Run CBL. Perf squeeze holes above TOC. Squeeze cmt to 50' above Ojo Alamo. TIH w/7" whipstock. Cut window and 12' of rat hole. TIH w/6 1/4" bit and drill w/gas. Drill to approximately 4800'. Run open hole logs. Run a full string of 4 1/2" casing and cmt. Selectively perf and frac the Mesa Verde formation. Flow test the Mesa Verde. Selectively perf and frac the Chacra formation. Flow test the Chacra. Flow test entire well. Commingle and produce Mesa Verde and Chacra zones. Submit final production allocation for commingle.

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

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

Signed [Signature] (SW) Title Regulatory Affairs Date 5/25/94

(This space for Federal or State Office use)

APPROVED BY _____ Title _____

CONDITION OF APPROVAL, if any:

NMOOD

APPROVED
JUN 08 1994
[Signature]

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-102
Revised February 21, 1994
Instructions on back
Submit to: Appropriate District Office
State Lease - 4 Copies
Federal Lease - 3 Copies
070 FARMINGTON, NM
AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

| | | |
|---|---|---|
| ¹ API Number 30-045-07494 | ¹ Pool Code 82329/ 72319 | ¹ Pool Name Otero Chacra Ext/ Blanco Mesa Verde |
| ¹ Property Code | ¹ Property Name Sharp | ¹ Well Number 1 |
| ¹ OGRID No. 14538 | ¹ Operator Name MERIDIAN OIL INC. | ¹ Elevation 5774' |

¹⁰ Surface Location

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| D | 18 | 28 N | 8 W | | 990 | North | 990 | West | S.J. |

¹¹ Bottom Hole Location If Different From Surface

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| | | | | | | | | | |

| | | | |
|---|-------------------------------|----------------------------------|---|
| ¹² Dedicated Acres 304.52/160 | ¹³ Joint or Infill | ¹⁴ Consolidation Code | ¹⁵ Order No. Adm.Order NWU-97 |
|---|-------------------------------|----------------------------------|---|

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

| | |
|--|--|
| | ¹⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief Signature Peggy Bradfield Printed Name Regulatory Representative Title 6-1-94 Date |
| | ¹⁸ SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. 5-31-94 Date of Survey Signature and Seal 6857 Certificate Number |
| | |