

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well GAS	5. Lease Number NM-01772A
2. Name of Operator Meridian Oil Inc.	6. If Indian, All. or Tribe Name
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700	7. Unit Agreement Name
4. Location of Well, Footage, Sec., T, R, M 1155'FSL, 1450'FEL Sec.7, T-28-N, R-9-W, NMPM	8. Well Name & Number Reid #14
	9. API Well No. 30-045-
	10. Field and Pool Aztec Pic.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 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 checked="" type="checkbox"/> Other - Evaluation extension
	<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

The subject well is unable to produce against line pressure. The time extension to further evaluate this well was appreciated. This well will be plugged and abandoned within 365 days. A plugging procedure will be submitted within 60 days.

RECEIVED
MAR 15 1993
OIL CON. DIV
DIST. 3

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

Signed [Signature] (TM) Title Regulatory Affairs Date 3/3/93

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

APPROVED
MAR 15 1993
AREA MANAGER