

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

<p>1. Type of Well GAS</p> <hr/> <p>2. Name of Operator Meridian Oil Inc. <i>Supplemental Report</i></p> <hr/> <p>3. Address & Phone No. of Operator Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec, T, R, M. 1610'S, 1070'E Sec. 5, T-27-N, R-09-W, NMPM</p>	<p>5. Lease Number SF-077874</p> <p>6. If Indian, All.or Tribe Name</p> <p>7. Unit Agreement Name</p> <p>8. Well Name & Number Hanks #18M</p> <p>9. API Well No.</p> <p>10. Field and Pool Basin Dakota/Blanco MV</p> <p>11. County and State San Juan County, NM</p>
---	---

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"/> Change of Plans
<input 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 type="checkbox"/> Other Evaluation	

13. Describe Proposed or Completed Operations

Meridian Oil is currently evaluating this wellbore for uphole potential. After geological and reservoir analyses have been completed, we will provide plans for disposition of this well. We intend to submit a sundry notice on or before April 1, 1992 stating our plans.

RECEIVED
NOV 4 1991
OIL CON. DIV.
DIST. 3

14. I hereby certify that the foregoing is true and correct
Signed *[Signature]* (JAS) Title Regulatory Affairs Date 11-1-91
ACCEPTED FOR RECORD

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITION OF APPROVAL, IF ANY: _____
[Signature]

ENCLOSURE

