

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

<p>1. Type of Well GAS</p> <p>2. Name of Operator Meridian Oil Inc.</p> <p>3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <p>4. Location of Well, Footage, Sec., T, R, M 850'N, 1470'E Sec.21, T-27-N, R-9-W, NMPM</p>	<p>5. Lease Number NM-011393</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name</p> <p>8. Well Name & Number Cleveland #220</p> <p>9. API Well No.</p> <p>10. Field and Pool Basin Frtland Coal</p> <p>11. County and State San Juan County, NM</p>
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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"/> Change of Plans
<input checked="" 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

13. Describe Proposed or Completed Operations

03-25-92 MOL&RU. NU BOP. Blow down. SDFN.

03-26-92 TOO H w/tbg. Load csg w/2% KCl wtr. PT RBP 1000#, failed. TOO H w/tbg. Ran CBL 1004-130'. TOC @ 920'. TIH w/2nd retrieving head. Release plug, pull up & reset @ 1860'. PT plug 1000#/15 min, ok. TOO H. Perf 2 holes @ 900'. Spot sand. Set FBP @ 560'. Squeezed w/195 sx Class "B" w/2% calcium chloride (250 cu.ft.). SDFN.

03-27-92 TOO H w/pkr. TIH, tag TOC @ 687'. Drl cmt 687-914', circ clean. PT 750#, ok. TOO H. SDFN.

03-28-92 TIH to 1860'. Circ down latch plug. TOO H. TIH, tag @ 2055'. CO to 2098'. Ran 61 jts 2 3/8", 4.7#, J-55 EUE 8rd tbg, 1977' set @ 1983'. Top of f nipple @ 1949'. ND BOP. NU WH. Released rig.

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

Signed *Regan Stappfield* Title Regulatory Affairs Date 3-30-92

ACCEPTED FOR RECORD

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any: _____

MAY 19 1992

NMOCD

FARMINGTON RESOURCE AREA
BY *smn*