

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</p> <hr/> <p>3. Address &amp; Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec., T, R, M 1545'FSL, 1270'FEL Sec.36, T-27-N, R-9-W, NMPM</p>	<p>5. Lease Number NO-G-0651-1134</p> <p>6. If Indian, All. or Tribe Name Navajo</p> <p>7. Unit Agreement Name Huerfanito Unit</p> <p>8. Well Name &amp; Number Huerfanito Unit #78M</p> <p>9. API Well No. 30-045-28971</p> <p>10. Field and Pool Blanco MV/Basin Dk</p> <p>11. County and State San Juan Co, 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 checked="" 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 -
		<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

07-09-93 TD 218'. Spud @ 5:00 pm 07-09-93. Drl surface hole. Ran 5 jts of 8 5/8", 24.0#, K-55 csg, 203' set @ 216'. Cmt w/160 sx Class "B" w/3% calcium chloride and 0.25 pps flocele (189 cu.ft.). Circ 10 bbl cmt to surface.

7 1/2 6676 w/2119

RECEIVED  
AUG - 5 1993  
OIL CON. DIV.  
DIST. 3

070 FARMINGTON, NM  
93 JUN 14 PM 4:06  
RECEIVED  
BLM

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

Signed *Ray Stubbins* Title Regulatory Affairs Date 7/14/93

(This space for Federal or State Office use)

APPROVED BY \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

CONDITION OF APPROVAL, if any: \_\_\_\_\_

ACCEPTED FOR RECORD

AUG 03 1993

NMOOD

FARMINGTON DISTRICT OFFICE  
*Sm*