

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

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
870' FNL, 850' FWL Sec. 25, T-27-N, R-9-W, NMPM

5. Lease Number
I-149-IND-8473
6. If Indian, All. or
Tribe Name
Navajo
7. Unit Agreement Name
Huerfanito Unit
8. Well Name & Number
Huerfanito Unit 82M
9. API Well No.
30-045-28977
10. Field and Pool
Blanco MV/Basin Dk
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 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
	<input checked="" type="checkbox"/> Other -	

13. Describe Proposed or Completed Operations

09-30-93 TIH w/stinger. CO to retainer. Pump 86 bbl 2% KCl wtr. Est inj rate. Pump 6 sx Class "B" cmt w/2% calcium chloride. Displace and squeeze w/26 BW. WOC.

RECEIVED
OCT 15 1993
OIL CON. DIV.
DIST. 3

RECEIVED
BLM
OCT 15 1993
FARMINGTON, NM

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

Signed [Signature] Title Regulatory Affairs Date 9/30/93

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ ACCEPTED FOR RECORD

CONDITION OF APPROVAL, if any:

OCT 03 1993

FARMINGTON DISTRICT OFFICE

BY [Signature]

WOOD