

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well GAS	5. Lease Number SF-077383A
2. Name of Operator Meridian Oil Inc.	6. If Indian, All.or Tribe Name
3. Address & Phone No. of Operator Box 4289, Farmington, NM 87499 (505) 326-9700	7. Unit Agreement Name
4. Location of Well, Footage, Sec, T, R, M. 990'S, 1650'E Sec. 21, T-28-N, R-10-W, NMMPM	8. Well Name & Number Kutz Deep Test #1
	9. API Well No.
	10. Field and Pool Basin Fruitland Coal
	11. County and State San Juan County, 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"/> 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 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	

The perforations for this recompletion should be: 2012-30', 2055-69', 2076-80', 2126-46'.

RECEIVED  
JAN 28 1991  
OIL CON. DIV.  
DIST. 3

14. I hereby certify that the foregoing is true and correct  
Signed [Signature] Title Regulatory Affairs Date 12-17-90

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITION OF APPROVAL, IF ANY:

JAN 18 1991  
DATE

FARMINGTON RESOURCE AREA

BY [Signature]