

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-079761 6. If Indian, All. or Tribe Name 7. Unit Agreement Name
2. Name of Operator Meridian Oil Inc.	8. Well Name & Number San Juan 29-4 U NP #2 9. API Well No.
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700	10. Field and Pool Basin Ft Coal 11. County and State Rio Arriba Co, NM
4. Location of Well, Footage, Sec., T, R, M 1750'FSL, 1560'FWL Sec.35, T-29-N, R-4-W, NMPM	
12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA	
Type of Submission <input type="checkbox"/> Notice of Intent <input type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment	Type of Action <input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <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	

Please change the name of this well to the San Juan 29-4 Unit NP #2 from the San Juan 29-4 Unit #2.

RECEIVED

JAN 19 1993

OIL CON. DIV.
DIST 3

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

Signed [Signature] Title Regulatory Affairs Date 1/6/93

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ ACCEPTED FOR RECORD _____
 CONDITION OF APPROVAL, if any:

JAN 14 1993

FARMINGTON RESOURCE AREA

BY [Signature]

NMOCQ