

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
BLM MAIL ROOM

Sundry Notices and Reports on Wells

RECEIVED
OCT 23 1995

OIL CON. DTE.
OCT 23 1995

55 OCT 18 PM 1:10

1070 FARMINGTON, NM

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
2450' FSL, 2270' FEL, Sec. 21, T-30-N, R-4-W, NMPM

5. Lease Number
SF-079487A
6. If Indian, All. or
Tribe Name
7. Unit Agreement Name
San Juan 30-4 Unit
8. Well Name & Number
San Juan 30-4 U #40
9. API Well No.
30-039-25538
10. Field and Pool
Basin Fruitland Coal/
East Blanco Pict. Cliffs/
Blanco Mesaverde
11. County and State
Rio Arriba Co, NM

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

Type of Submission

☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment

Type of Action

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other -
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut off
☐ Conversion to Injection

13. Describe Proposed or Completed Operations

10-9-95 Drill to 4277'. Circ hole clean. TOOH for cores.
10-10-95 TIH w/core. Core #1 @ 4277-4307, cut 30', recovered 18'. Drill @ 4307-4333'.
10-11-95 Drill to intermediate TD @ 4851'. Circ hole clean. TOOH. Ran logs.
10-12-95 TIH, circ hole clean. TOOH. TIH w/24 jts 7" 23# K-55 LTC csg & 83 jts 7" 20#
K-55 LTC csg, set @ 4851'. Cmdt first stage w/185 sx Class "B" neat cmt w/2%
calcium chloride, 5 pps Gilsonite, 0.25 pps Flocele (218 cu.ft.). Circ 15
bbl cmt to surface. Stage tool set @ 4156'. Cmdt second stage w/740 sx Class
"B" 65/35 poz w/35% poz mix B, 2% calcium chloride, 5 pps Gilsonite, 0.25 pps
Flocele, 6- gel (1310 cu.ft.). Tailed w/100 sx Class "B" neat cmt w/2% calcium
chloride, 5 pps Gilsonite, 0.25 pps Flocele (118 cu.ft.). Circ 40 bbl cmt to
surface. WOC.
10-13-95 PT csg to 1500 psi/15 min, OK. Drilling ahead.

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

Signed [Signature] Title Regulatory Administrator Date 10/16/95

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

OCT 18 1995

NMCO

FARMINGTON DISTRICT OFFICE

RV