

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		87 JUL 10 AM 11:04	5. LEASE DESIGNATION AND SERIAL NO. NM 03877
2. NAME OF OPERATOR Meridian Oil Inc.		FARMINGTON RESOURCE AREA FARMINGTON NEW MEXICO	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Post Office Box 4289, Farmington, NM 87499			7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1650'S, 1090'W			8. FARM OR LEASE NAME Duff
14. PERMIT NO.		15. ELEVATIONS (Show whether DP, RT, OR, etc.) 5820'GL	9. WELL NO. 2
			10. FIELD AND POOL, OR WILDCAT Crouch Mesa MV
			11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA Sec. 5, T-29-N, R-11-W N.M.P.M.
			12. COUNTY OR PARISH San Juan
			13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

We request 45 days to evaluate the sale of this well to be used as a disposal well.

THIS APPROVED

8/24/87

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

SIGNED

*[Signature]*

TITLE Drilling Clerk

7-9-87

DATE

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side

*[Signature]*  
FARMINGTON RESOURCE AREA