

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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> X OTHER                                                                 |  | 7. UNIT AGREEMENT NAME                                                              |
| 2. NAME OF OPERATOR<br>Meridian Oil Inc.                                                                                                       |  | 8. FARM OR LEASE NAME<br>Martin                                                     |
| 3. ADDRESS OF OPERATOR<br>Post Office Box 4289, Farmington, NM 87499                                                                           |  | 9. WELL NO.<br>1                                                                    |
| 4. LOCATION OF WELL (Report location clearly and in accordance with State requirements. See also space 17 below.)<br>At surface 1650'S, 1650'W |  | 10. FIELD AND POOL, OR WILDCAT<br>Basin Fruitland Coal                              |
| 14. PERMIT NO.                                                                                                                                 |  | 11. SEC. T. R. M. OR BLM. AND SURVEY OR AREA<br>Sec: 34, T-30-N, R-11-W<br>N:M:P:M: |
| 15. ELEVATIONS (Show whether of, to, or etc.)<br>DIST. 3                                                                                       |  | 12. COUNTY OR PARISH<br>San Juan                                                    |
|                                                                                                                                                |  | 13. STATE<br>NM                                                                     |

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

NOTICE OF INTENTION TO:

|                                              |                                               |
|----------------------------------------------|-----------------------------------------------|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PELL OR ALTER CASING <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/>      | MULTIPLE COMPLETE <input type="checkbox"/>    |
| SHOOT OR ACIDIZE <input type="checkbox"/>    | ABANDON* <input type="checkbox"/>             |
| REPAIR WELL <input type="checkbox"/>         | CHANGE PLANS <input type="checkbox"/>         |
| (Other) <input type="checkbox"/>             |                                               |

SUBSEQUENT REPORT OF:

|                                                |                                          |
|------------------------------------------------|------------------------------------------|
| WATER SHUT-OFF <input type="checkbox"/>        | REPAIRING WELL <input type="checkbox"/>  |
| FRACTURE TREATMENT <input type="checkbox"/>    | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/>    |
| (Other) <input type="checkbox"/>               |                                          |

(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.)

08-11-89 MOL&RU. TOOH. LD 1' tbg. SD for weekend.  
08-14-89 Remove tbg hgr. TIH w/Baker 5 1/2" csg scraper. Circ hole w/wtr. TOOH w/tbg & scraper. RU wireline. TIH w/cmt ret set @ 2090'. TIH w/full bore pkr set @ 624'. PT csg 2400#/10 min, ok. Isolate hole in csg @ 106'. LD pkr. SDFN.  
08-15-89 Run csg hole neutron, CCL, CBL w/GR. Good bond across coal zone. RIH w/2 3/8" tbg set @ 2084'. Circ hole clean w/wtr. Spot 200 gal 7 1/2% hcl. POOH w/2 3/8" tbg. Perf 1890-1900', 1940-50', 1970-78', 2008-10', 2066-75', 2080-82' w/2 spf.  
08-16-89 RIH w/5 1/2" fullbore pkr set @ 149'. Frac w/156,900# 20/40 sand & 42 tons CO2 and gel.  
08-17-89 Flow to pit. Logged off. TOOH w/pkr. TIH w/2 3/8" tbg, tag sand @ 1940'. Circ w/wtr to PBTD 2090'. TIH w/RBP set @ 992'. TOOH, dump sand on RBP, tih & set pkr @ 160'. PT 750#, ok. Perf squeeze holes @ 800'. Pkr set @ 720'. Cmt w/40 sx Class "B" w/1% CaCl. TOOH. Perf squeeze holes @ 200'. TIH w/tbg set @ 185'. Pump 20 sx Class "B" w/1% CaCl2. Circ good cmt thru bradenhead. SDFN. (cont'd on back)

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

Regulatory Affairs ( )

08-24-89

SIGNED

TITLE

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NMOOD

\*See Instructions on Reverse Side

08-18-89     TIH, tag cmt @ 114'. PT csg 550#, ok. Drl cmt to 205'. PT  
             550#, ok. Tag @ 750'. Drl cmt to 838'. PT 550#, ok. SDFN:  
08-19-89     TOOH w/tbg. LDDC's. TIH w/ret.tool. Circ sand from RBP @  
             992'. TOOH w/RBP. TIH w/2 3/8" tbg to 1850'. SD for weekend  
08-21/22-89   Blowing w/air.  
08-23-89     Land 66 jts 2 3/8", 4.7# tbg set @ 2050'. SN @ 2018'. ND  
             BOP. NU WH. Released rig.