

submitted in lieu of Form 3160-5

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-078138
2. Name of Operator MERIDIAN OIL	6. If Indian, All. or Tribe Name
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700	7. Unit Agreement Name
4. Location of Well, Footage, Sec., T, R, M 1450' FSL, 1850' FEL Sec.15, T-30-N, R-11-W, NMPM	8. Well Name & Number Morris A #5
	9. API Well No. 30-045-
	10. Field and Pool Pictured Cliffs
	11. County and State San Juan Co, 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 checked="" 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 checked="" 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 Injectio

13. Describe Proposed or Completed Operations

This well is on line and producing in paying quantities.

RECEIVED
APR - 7 1994
OIL CON. DIV.
DIST. 3

RECEIVED
BLM
94 MAR 30 PM 3:23

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

Signed Jerry Shadwell (SBD) Title Regulatory Affairs ACCEPTED FOR RECORD

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ APR 5 1994

CONDITION OF APPROVAL, if any:

NMOCB

FARMINGTON
BY MT