

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 checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Meridian Oil Inc.	8. FARM OR LEASE NAME San Juan
3. ADDRESS OF OPERATOR Post Office Box 4289, Farmington, NM 87499	9. WELL NO. 11
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1080'S, 1190'W	10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde
14. PERMIT NO. JUN 05 1987	11. SEC. T. R. M. OR BLK. AND SURVEY OR AREA Sec. 11, T-30-N, R-10-W N.M.P.M.
15. ELEVATIONS (Show whether OF, RT, OR, etc.) 6511'GL	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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PCLL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input checked="" type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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.)

05-18-87 MOL & RU. TOO H w/tbg. Isolated hole in 4 1/2" casing between 99-130'. Pressure tested csg below 130' to 1600#, ok. SDON

05-19-87 Squeeze cement w/100 sx. Cl B w/2% CaCl (118 cu.ft.). SDON.

05-20-87 Drld out cmt. Pressure tested to 1000#, did not hold. Circ. hole clean. SDON

05-21-87 Circ. hole clean. TOO H. Repaired wellhead. SDON.

05-22-87 Squeeze cement w/35 sx. Cl B w/2% CaCl, 0.75% CD-31 turbulence inducer (41 cu.ft.). SDON.

05-26-87 Drill out cmt. Pressure tested to 600#, ok. Clean out to total depth @ 5554'. TOO H. SDON

05-27-87 Ran 176 jts. of 2 3/8", 4.7#, J-55 tbg set @ 5521'. Seating nipple at 5448'. ND BOP. NU WH.

RECEIVED
JUN-9 1987
OIL CON. DIV.
DIST. 3

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

SIGNED [Signature] TITLE Drilling Clerk DATE 06-04-87

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

FARMINGTON RESOURCE AREA
BY [Signature]

*See Instructions on Reverse Side