

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

<p>1. Type of Well GAS</p> <hr/> <p>2. Name of Operator Meridian Oil Inc.</p> <hr/> <p>3. Address & Phone No. of Operator Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec, T, R, M. 990'S, 990'W Sec. 8, T-30-N, R-10-W, NMPM</p>	<p>5. Lease Number SF-077754</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name</p> <p>8. Well Name & Number Kelly Knott #1</p> <p>9. API Well No.</p> <p>10. Field and Pool Blanco Mesa Verde</p> <p>11. County and State San Juan County, NM</p>
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12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

Type of Submission	Type of Action	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other - Sidetrack, case, cmt & frac	

13. Describe Proposed or Completed Operations

To increase production, it is planned to workover and restimulate the subject well in the following manner:

TOOH w/tbg. If stuck, cut ± 100 below 7" csg shoe.
Set cmt retainer near btm of 7" csg shoe & test csg to 1000#.
Squeeze open hole w/ ± 750 sx Class "B" w/4% gel and 12.5# gilsonite/sx, followed by 50 sx Class "B" cmt w/2% calcium chloride and 10% sand. Isolate and squeeze cmt any leaks. Run GR-CBL and cmt Ojo Alamo formation if necessary.
Sidetrack and drill to $\pm 5750'$.
Run open hole logging suite.
Run 4 1/2", 10.5# csg to surface and cmt as required to tie into 7" csg shoe.
Perforate and sand water frac the Mesa Verde formation.
Return well to production.

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

Signed John Bradford (DM) Title Regulatory Affairs

Date: 7-19-91

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

CONDITION OF APPROVAL, IF ANY:

NMOCD

<p>APPROVED</p> <p>DATE <u>7-19-91</u></p> <p>AREA MANAGER</p> <p>FARMINGTON RESOURCE AREA</p>
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