

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-078386
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 San Juan 32-9 Unit
4. Location of Well, Footage, Sec., T, R, M 1650'FSL, 1700'FWL Sec.15, T-31-N, R-9-W, NMPM	8. Well Name & Number San Juan 32-9 U 5
	9. API Well No.
	10. Field and Pool m✓
	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 checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input 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 Injection

13. Describe Proposed or Completed Operations

This well is being considered either for plug and abandonment or recompletion in the Pictured Cliffs during 1994.

OCT 23 1993
OIL CON. DIV
DIST. 3
RECEIVED
OCT 19 1993
DISTRICT MANAGER

THIS APPROVAL EXPIRES MAY 01 1994

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

Signed [Signature] (GL) Title Regulatory Affairs Date 10/18/93

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date 10/20 1993

CONDITION OF APPROVAL, if any: _____

APPROVED
DISTRICT MANAGER