

1. Type of Well
GAS

2. Name of Operator
MERIDIAN OIL

3. Address & Phone No. of Operator
PO Box 4289, Farmington, NM 87499 (505) 326-9700

4. Location of Well, Footage, Sec., T, R, M
1068'FNL, 980'FWL, Sec.24, T-30-N, R-9-W, NMPM

5. Lease Number
SF-078201A
6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
Riddle A #8

9. API Well No.
30-045-20490

10. Field and Pool
Blanco 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 checked="" 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 type="checkbox"/> Other -	

13. Describe Proposed or Completed Operations

- 12-14-94 MIRU. ND WH. NU BOP. PT BOP. TOOH w/76 jts 1 1/4" tbq. Tbg parted above pkr @ 2467'. TIH w/2 7/8" gauge ring to 1040'. POOH. (Received verbal approval from Wayne Townsend @ BLM to TIH open ended to 2418'). Plug #1: Pump 32 sx Class "B" cmt @ 1257-2418'. TOOH. WOC. SDON.
- 12-15-94 Tag TOC @ 1352' (tag TOC approved by Wayne Townsend). TOOH. Circ 1 bbl cmt out bradenhead w/33 bbl wtr. Hole in csg @ 795'. Plug #2: pump 256 sx Class "B" cmt from 795' out bradenhead. Light cmt returns out bradenhead. SI. WOC. SDON.
- 12-16-94 ND BOP. Cut off WH. Found cmt approximately 20' from surface. Pump 5 sx Class "B" cmt to fill csg. Install dry hole marker w/10 sx cmt. RD. Well plugged and abandoned 12-16-94.

**Approved as to plugging of the well bore.
Lifting under bond is retained until
surface restoration is completed.**

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

Signed [Signature] Title Regulatory Affairs Date 12/21/94

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

NMOC

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