

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
1070' FSL, 980' FEL Sec. 20, T-31-N, R-8-W, NMPM

5. Lease Number
SF-078511

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
Quinn #9

9. API Well No.
30-045-23711

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 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 Injectio

13. Describe Proposed or Completed Operations

This well will not currently flow into the existing pipeline due to high line pressures. It is currently being evaluated for workover or plug and abandonment.

RECEIVED
JUN 27 1994
OIL CON. DIV.
DIST. 3

670 PICTURED CLIFFS, NM
JUN 17 1994

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

Signed [Signature] (JAS6) Title Regulatory Affairs Date 6/16/94

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

MINC-05

APPROVED
[Signature]