

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

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
1520' FNL, 1520' FWL, Sec.12, T-31-N, R-9-W, NMPM
f

5. Lease Number
SF-078508
6. If Indian, All. or
Tribe Name
7. Unit Agreement Name
8. Well Name & Number
Nordhaus #5A
9. API Well No.
30-045-24369
10. Field and Pool
Blanco MV/Basin DK
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 type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" 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 - Tubing repair	

13. Describe Proposed or Completed Operations

9-12-96 MIRU. ND WH. NU BOP. TOOH w/2 1/16" tbg. SDON.
9-13-96 TIH w/perf sub, 185 jts 2 1/16" J-55 tbg, landed @ 6000'. ND BOP. NU WH.
RD. Rig released.

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

Signed *Deputy State Auditor* Title Regulatory Administrator Date 9/18/96

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

SEP 24 1996

FARMINGTON DISTRICT OFFICE

NMDCD