

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT**

**SUBMIT IN TRIPLICATE\***  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

1.  OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
Meridian Oil Inc.

3. ADDRESS OF OPERATOR  
Post Office Box 4289, Farmington, NM 87499

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
At surface 1120'S, 1145'W

14. PERMIT NO. \_\_\_\_\_ 15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
6526'GL

5. LEASE DESIGNATION AND SERIAL NO.  
NM-03202

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
San Juan

9. WELL NO.  
200

10. FIELD AND POOL, OR WILDCAT  
Undes. Fruitland Coal

11. SEC., T., R., N., OR BLK. AND SURVEY OR AREA  
Sec. 10, T-30-N, R-10-W  
N.M.P.M.

12. COUNTY OR PARISH 13. STATE  
San Juan NM

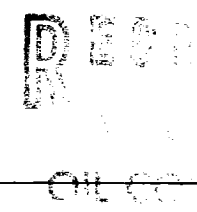
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Spud Well</u> <input type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

10-28-88 Spudded well at 8:30 pm 10-28-88. Drilled to 227'. Ran 5 jts. 9 5/8", 32.3#, H-40 surface casing set at 227'. Cemented with 150 sks. Class "B" with 1/4#/sk. gel-flake and 3% calcium chloride (177 cu.ft.). circulated to surface. WOC 12 hrs. Tested 600#/30 minutes, held ok.

11-01-88 TD 3144'. Ran 74 jts. 7", 20.0#, K-55 intermediate casing, 3131' set @ 3144'. Cemented with 15 sx. Class "B" 65/35 Poz with 6% gel, 2% calcium chloride and 1/2 cu.ft. perlite/sx (30 cu.ft.) followed by 100 sks. Class "B" with 2% calcium chloride (118 cu.ft.); 370 sx. Class "B" 65/35 Poz with 6% gel, 2% calcium chloride and 1/2 cu.ft. perlite/sx (722 cu.ft.) followed by 100 sx Class "B" with 2% calcium chloride (118 cu.ft.). WOC 12 hours. Held 1200#/30 min. Top of cement @1100'.



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

SIGNED [Signature] TITLE Regulatory Affairs DATE 11-02-88

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

**ACCEPTED FOR RECORD**  
NOV 04 1988  
FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side

BY KV