

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on re-
verse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

SE-078125B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Meridian Oil Inc.	8. FARM OR LEASE NAME Pierce A
3. ADDRESS OF OPERATOR P.O. Box 4289, Farmington, NM 87499	9. WELL NO. 210
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below) At surface 1190'S, 1800'W	10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal
14. PERMIT NO	11. SEC., T., R., N., OR S.E. AND CURVEY OR AREA Sec. 24, T30N, R10W NMDM 13
15. ELEVATIONS (Show whether OF, ST, OR, etc.) 6397'GL	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 ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) ☐	

(Other) Revision ☒

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. (Check and 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.)

Attached is a copy of the C102 showing the revised pool & dedication.

RECEIVED

DEC 28 1983

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

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

SIGNED

[Signature]

TITLE Regulatory Affairs

DATE 12-23-83

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

BY

[Signature]