

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

Form approved, U
Budget Bureau No. 1004-0137
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		1b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ REPERFORATE ☐ Other _____	
2. NAME OF OPERATOR Meridian Oil Inc.			
3. ADDRESS OF OPERATOR PO Box 4289, Farmington, NM 87499			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements). At surface 1030'N, 1705'E At top prod. interval reported below At total depth			
14. PERMIT NO. 30-045-28236		DATE ISSUED APR 24 1991	
15. DATE SPUDDED 9-26-90		16. DATE T.D. REACHED 2-20-91	
17. DATE COMPL. (Ready to prod.) 3-2-91		18. ELEVATIONS (TOP, RKB, ST, GR, ETC.)* 5985'	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 2826'	
21. PLUG BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Fruitland Coal - uncemented Liner	
25. ROTARY TOOLS		26. TYPE ELECTRIC AND OTHER LOGS RUN none	
27. CABLE TOOLS		28. WAS WELL CORRED no	
29. WAS DIRECTIONAL SURVEY MADE No			
30. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
9 5/8"	36.0#	354'	12 1/4"
7 "	20.0#	2504'	8 3/4"
31. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	PACKER SET (MD)
5 1/2	2472'	2826'	at 2808'
32. PERFORATION RECORD (Interval, size and number) 2556-2824' (predrilled liner)			
33. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
34. PRODUCTION			
DATE FIRST PRODUCTION Shut-in waiting on pipeline connection, capable of commercial hydrocarbon prod.			
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) -pitot gge			
WELL STATUS (Producing or (Abandoned))			
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD
SI 1434	SI 1411		
35. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To be sold BHP @ 2800' 1552			
36. LIST OF ATTACHMENTS none			
37. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED <i>[Signature]</i>		TITLE Regulatory Affairs	
DATE 3-18-91		DATE	

*(See Instructions and Spaces for Additional Data on Reverse Side)

