

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Expires August 31, 1985

3. LEASE DESIGNATION AND SERIAL NO.

NM-03780

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

San Juan 32-5 Unit

8. FARM OR LEASE NAME

San Juan 32-5 Unit

9. WELL NO.

106

10. FIELD AND POOL, OR WILDCAT

Basin Fruitland Coa.

11. SEC., T., R., M., OR BLK. AND

SURVEY OR AREA
Sec. 26, T-32-N, R-06-
N.M.P.M.

12. COUNTY OR PARISH 13. STATE

Rio Arriba NM

1. OIL ☐ GAS ☐ OTHER ☒

2. NAME OF OPERATOR

Meredian Oil Co., Inc.
El Paso Natural Gas Company

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 655'S, 1685'W

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, TO, OR, etc.)

6386'GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

Running Casing

(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.)*

CORRECTED COPY

11-03-88 TD 3184'. Ran 8 jts. 4 1/2", 10.5#, K-55 casing liner, 285' set @ 3184'. Float shoe set @ 3184'. Top of liner hanger @ 2899'. Cemented w/100 sks. Class "B" with 3% calcium chloride (21 cu.ft.), reversed to surface.

RECEIVED

APR 25 1989

REG. DIV
PAGE 3

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

SIGNED

[Signature]

TITLE Regulatory Affairs

DATE

11-15-8

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side