

90 APR 2 AM 10 01

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
El Paso Natural Gas Company

3. Address & Phone No. of Operator
Box 4289, Farmington, NM 87499 (505) 326-9700

4. Location of Well, Footage, Sec, T, R, M.
2325' N, 1010' E Sec. 23, T-32-N, R-5 W, NMPM

5. Lease Number
SF-079011

6. If Indian, All or
Tribe Name

7. Unit Agreement Name
San Juan 32-5 Unit

8. Well Name & Number
San Juan 32-5 Unit 101

9. API Well No.

10. Field and Pool
Basin Fruitland Coal

11. County and State
Rio Arriba 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"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut Off
	<input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

Please show the following revisions on the well completion report

Type electric and other logs run: DIL, FDC-HRL, CNGT, NGT

RECEIVED
MAR 26 1990
OIL CON. DIV.
DIST. 3

Accepted For Record
MAR 21 1990
[Signature]
Chief, Branch of
Mineral Resources

14. I hereby certify that the foregoing is true and correct
Signed *[Signature]* Title Regulatory Affairs Date 2-28-90

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITION OF APPROVAL, IF ANY: *None*