

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

RECEIVED
MAY 17 1996
Bureau of Land Management
Durango, Colorado

1. Type of Well
GAS

2. Name of Operator
MERIDIAN OIL

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

4. Location of Well, Footage, Sec., T, R, M
1450' FNL, 790' FWL, Sec. 25, T-31-N, R-14-W, NMPM

5. Lease Number
MOO-C-1420-0625
6. If Indian, All. or
Tribe Name
Ute Mountain Ute
7. Unit Agreement Name

8. Well Name & Number
Pinon Mesa B #1E
9. API Well No.
30-045-26387
10. Field and Pool
Basin Dakota
11. County and State
San Juan Co, NM

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

Type of Submission	Type of Action
☐ Notice of Intent	☐ Abandonment
☒ Subsequent Report	☐ Recompletion
☐ Final Abandonment	☐ Plugging Back
	☐ Casing Repair
	☐ Altering Casing
	☒ Other - Bradenhead repair
	☐ Change of Plans
	☐ New Construction
	☐ Non-Routine Fracturing
	☐ Water Shut off
	☐ Conversion to Injection

13. Describe Proposed or Completed Operations

5-9-96 MIRU. ND WH. NU BOP. TOOH w/2 3/8" tbg. TIH w/4 1/2" gauge ring to 6000'. Set RBP @ 5940'. TOH. Dump sd down csg. Load hole w/wtr. PT RBP & csg to 1000 psi/15 min, OK. SDON.

5-10-96 Ran CBL-CCL-GR @ 0-830', TOC @ 698'. TIH, perf 2 sqz holes @ 680'. TOOH. Establish circ down csg & out bradenhead. Circ hole clean. Pump 245 sx Class "B" neat cmt. Circ 7.5 bbl cmt to surface. Sqz to 200 psi. WOC. SD for weekend.

5-13-96 TIH, tag TOC @ 470'. Drill cmt @ 470-620'. TOOH. SDON.

5-14-96 Drill cmt @ 620-695'. Circ hole clean. PT sqz to 1000 psi/15 min, OK. TOOH. TIH w/retrieving tool. Reverse sd off RBP. Latch RBP, TOOH. SDON.

5-15-96 TIH w/192 jts 2 3/8" 4.7# J-55 EUE 8RD tbg, landed @ 6204'. ND BOP. NU WH. RD. Rig released.

DRC 5-25-96

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

Signed *Regan Shadfield* Title Regulatory Administrator Date 5/16/96

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____
CONDITION OF APPROVAL, if any: