UNITED STATES

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

		5.	Lease Number
		_	SF-078459B
Type of Well		6.	If Indian, All. o
GAS			Tribe Name
		_	
		7.	Unit Agreement Na
Name of Operator			
MERIDIAN OIL		_	Allison Unit
		8.	
Address & Phone No. of Operator		_	Allison Unit #103
PO Box 4289, Farmington, NM 87499 (505) 326-9700		9.	
		1.0	30-045-26956 Field and Pool
Location of Well, Footage, Sec., T, R, M 1795'FSL, 2270'FWL, Sec.10, T-32-N, R-7-W, NMPM		10.	Basin Fruitland C
		11	County and State
			San Juan Co, NM
			Juli Juli Juli
. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOT	ICE, REPORT,	OTHER	DATA
	Action		
Notice of Intent Abandonment	Change	of Pla	
Recompletion	New Co		
X Subsequent Report Plugging Back			Fracturing
Casing Repair	Water		
Final Abandonment Altering Casin	g Conver	sion to	o Injection
X_ Other -			
			r171
	EGATANAN SILANAN ANAN SILANAN SILANAN SILANAN SILANAN ANAN SILANAN ANAN SILANAN SILANA		OTO THE COMMINION, NM
	E GALLA		_ , , •
	10 891. c		_ , , •
. I hereby certify that the foregoing is true a	and correct.		N 7
ned flathy Was such (JCG6) Title Regul	and correct.		N 7
gned Acced (JCG6) Title Regul his space for Federal or State Office use) PROVED BY	and correct.		N 7
gned flagger Mad Nucled (JCG6) Title Regulation Space for Federal or State Office use) PROVED BY	and correct.	strato	N 7
gned for Federal or State Office use)	and correct.	strato Pate _	r_Date 5/28/96
gned flagger Mad Nucled (JCG6) Title Regulation Space for Federal or State Office use) PROVED BY	and correct. atory Admini	strato Date EPIED MAY	r_Date 5/28/96