

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well GAS	5. Lease Number SF-078439
2. Name of Operator Meridian Oil Inc.	6. If Indian, All. or Tribe Name
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700	7. Unit Agreement Name
4. Location of Well, Footage, Sec., T, R, M NWSW Sec.33, T-31-N, R-9-W, NMPM <i>2255' FSL & 1065' FWC</i>	8. Well Name & Number Johnston Federal #28
	9. API Well No. 30-045-
	10. Field and Pool Basin Ft Coal
	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
<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 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

This well will be disconnected from the pipeline and all surface production equipment will be removed upon the successful completion of the replacement well, the Johnston Federal #280. The Fruitland Coal reservoir pressure will be periodically monitored in the Johnston Federal #28.

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

Signed *[Signature]* Title Regulatory Affairs Date 11/4/92

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

APPROVED

NOV 09 1992

AREA MANAGER

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