

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-078389A 6. If Indian, All. or Tribe Name 7. Unit Agreement Name San Juan 32-9 Unit 8. Well Name & Number San Juan 32-9 U #220 9. API Well No. 30-045-28849 10. Field and Pool Basin Frt Coal 11. County and State San Juan Co, NM
2. Name of Operator Meridian Oil Inc.	
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700	
4. Location of Well, Footage, Sec., T, R, M 1040'FNL, 1840'FEL Sec.11, T-31-N, R-10-W, NMPM	

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"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other -	

13. Describe Proposed or Completed Operations

02-17-93 TD 3026'. Ran 8 jts 5 1/2", 15.5#, K-55 8rd LT&C pre-perforated casing liner, 366' set @ 3026'. Top of liner @ 2649'. Did not cmt.

RECEIVED

MAR 5 1993

OIL CON. DIV.

DATE

93 FEB 25 PM 3:41
OIL CON. DIV., NM

RECEIVED
BLM

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

Signed *Debra J. Stachurski* Title Regulatory Affairs Date 2/24/93

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

NM000

VLM

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