

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

Sundry Notices and Reports on Wells

<p>1. Type of Well GAS</p> <hr/> <p>2. Name of Operator MERIDIAN OIL</p> <hr/> <p>3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <hr/> <p>4. Location of Well, Footage, Sec., T, R, M 1495'FNL, 1030'FEL Sec.22, T-31-N, R-10-W, NMPM</p>	<p>5. Lease Number NM-013688</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name</p> <p>8. Well Name & Number Atlantic #5R</p> <p>9. API Well No. 30-045-</p> <p>10. Field and Pool Blanco Mesa Verde</p> <p>11. County and State San Juan Co, NM</p>
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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 checked="" 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

05-23-93 Ran CBL 5840-1900', TOC @ 2143'. Set RBP @ 3490' to isolate liner. Perf 2 holes @ 1725'. Set FBP @ 1503'. Squeezed w/307 sx Class "B" 65/35 Poz w/2% calcium chloride, 6% gel, 0.25#/sx flocele, tailed w/100 sx Class "B" w/2% calcium chloride. Circ 31 bbl. to surface.

RECEIVED
JUN 3 1993
OIL CON. DIV.
DIST. 3

RECEIVED
BLM
93 MAY 28 PM 3:20
070 FARMINGTON, NM

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

Signed *[Signature]* Title Regulatory Affairs Date 5/26/93

(This space for Federal or State Office use)

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

ACCEPTED FOR RECORD

JUN 01 1993

NMOCD

FARMINGTON DISTRICT OFFICE
BY *[Signature]*