

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

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
815 FSL, 1120 FEL Sec.31, T-32-N, R-9-W, NMPM

5. Lease Number
SF-078509

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name
San Juan 32-9 Unit

8. Well Name & Number
San Juan 32-9U #41A

9. API Well No.
30-045-29129

10. Field and Pool
Blanco Pic.Cliffs Ext
Blanco Mesa Verde

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 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 checked="" 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 Injectio

13. Describe Proposed or Completed Operations

06-27-94 TD 225'. Spud @ 3:00 p.m. 6-27-94. Drl surface hole. Ran 5 jts 9 5/8" 36# K-55 ST&C csg, 206' set @ 225'. Cmt w/160 sx Class "G" 3% calcium chloride and 0.25 pps flocele (189 cu. ft), circ 15 bbl cmt to surface.

RECEIVED
JUL 8 9 1994
OIL COAL DIV.
DIST 2

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

Signed [Signature] Title Regulatory Affairs Date 6/28/94

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

NMOOD

BY

Sm