

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
 State Fee
 5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL GAS WELL OTHER

7. Unit Agreement Name

Name of Operator

Meridian Oil Inc.

8. Farm or Lease Name

Morris A

Address of Operator

PO Box 4289, Farmington, NM 87499

9. Well No.

6

Location of Well

UNIT LETTER L 1550 FEET FROM THE South 990 FEET FROM

10. Field and Pool, or Wildcat
Aztec Pic.Cliffs

West 21 30N 11W
TMC LINE, SECTION TOWNSHIP RANGE NMPM.

15. Elevation (Show whether DF, RT, CR, etc.)

5791'GL

12. County
San Juan

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK
 TEMPORARILY ABANDON
 PULL OR ALTER CASING
 OTHER

PLUG AND ABANDON
 CHANGE PLANS

REMEDIAL WORK
 COMMENCE DRILLING OPNS.
 CASING TEST AND CEMENT JOBS
 OTHER

ALTERING CASING
 PLUG AND ABANDONMENT

7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Permission is requested to recomplete in the Fruitland Coal utilizing short radius lateral drilling techniques. The proposed lateral will extend approximately 180' horizontally with a N25°E orientation. The wellbore will not cross the surface orthodox location boundaries. The well will be open hole completed and 1 1/2" tbg. set at approximately 2100'.

RECEIVED
 JUL 01 1988
 OIL CON. DIV.
 DIST. 3

8. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

Signed [Signature]

Drilling Clerk

6-29-88

APPROVED BY Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT. 3

DATE JUL 01 1988

CONDITIONS OF APPROVAL, IF ANY: