

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State ☒	Fee
5. State Oil & Gas Lease No.	
B-1124-28	

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 TO DRILL" FORM C-1011 FOR SUCH PROPOSALS.)

OIL WELL ☐	GAS WELL ☒	OTHER-	7. Unit Agreement Name
Name of Operator			8. Farm or Lease Name
Meridian Oil Inc.			Brookhaven Com
Address of Operator			9. Well No.
P.O. Box 4289, Farmington, New Mexico 87499			200
Location of Well			10. Field and Pool, or Acreage
UNIT LETTER <u>H</u> <u>1540</u> FEET FROM THE <u>North</u> LINE AND <u>1025</u> FEET FROM			Basin Fruitland Coa
THE <u>East</u> LINE, SECTION <u>16</u> TOWNSHIP <u>31N</u> RANGE <u>10W</u> N.M.P.M.			
11. Elevation (Show whether DF, RT, GR, etc.)			12. County
6198' GL			San Juan

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

PERFORM REMEDIAL WORK	☐
TEMPORARILY ABANDON	☐
PULL OR ALTER CASING	☐

PLUG AND ABANDON	☐
CHANGE PLANS	☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK	☐
COMMENCE DRILLING OPS.	☐
CASING TEST AND CEMENT JOBS	☐
OTHER	

ALTERING CASING	☐
PLUG AND ABANDONMENT	☐

OTHER Permit to Drill Extension

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.

It is anticipated that the "Permit to Drill" will expire before this well can be spudded; Therefore, an extension is requested.

APPROVAL EXPIRES 3-7-90
UNLESS DRILLING IS COMMENCED.
SPUD NOTICE MUST BE SUBMITTED
WITHIN 10 DAYS.RECEIVED
SEP 19 1989
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

TITLE Regulatory AffairsDATE 9-13-89

Original Signed by FRANK T. CHAVEZ

APPROVED BY

SUPERVISOR DISTRICT 11

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: