

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-103
Revised 10-1-

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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. E-3150-1	

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 Brookhaven Com K
Address of Operator P.O. Box 4289, Farmington, New Mexico 87499		9. Well No. 201
Location of Well UNIT LETTER <u>K</u> <u>1690</u> FEET FROM THE <u>South</u> LINE AND <u>1590</u> FEET FROM THE <u>West</u> LINE, SECTION <u>16</u> TOWNSHIP <u>31N</u> RANGE <u>10W</u> N.M.P.M.		10. Field and Pool, or Acreage Basin Fruitland Coal
15. Elevation (Show whether DF, RT, GR, etc.) 6026' 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 ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPERATIONS ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER <u>Permit to Drill Extension</u> ☒	CASING TEST AND CEMENT JOBS ☐	OTHER ☐

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.

RECEIVED
APR 19 1989
OIL CONSERVATION DIVISION
SANTA FE, N.M.APPROVAL EXPIRES 9-1-89
UNLESS DRILLING IS COMMENCED.
SPUD NOTICE MUST BE SUBMITTED
WITHIN 10 DAYS.

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

SIGNED Frank T. Chavez TITLE Regulatory Affairs DATE 4-19-89

Original Signed by FRANK T. CHAVEZ

APPROVED BY _____ TITLE _____ DATE APR 21 1989

CONDITIONS OF APPROVAL, IF ANY: