

**N. M. OIL CONS. COMMISSION**  
**3101 CARLSBAD**  
**P. O. BOX 1980**  
**HOBBS, NEW MEXICO 88401**

Form 3160-5  
 (June 1990)

UNITED STATES  
 DEPARTMENT OF THE INTERIOR  
 BUREAU OF LAND MANAGEMENT

FORM APPROVED  
 Budget Bureau No. 1004-0135  
 Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
 Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well  
 Oil Well     Gas Well     Other

2. Name of Operator  
 MERIDIAN OIL INC. *Southland Royalty Co*

3. Address and Telephone No.  
 P.O. BOX 51810 MIDLAND, TEXAS 79710-1810 915-688-6800

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
 SECTION: *ET, 8, 17, and 18*  
 T-18-S, R-33-E *secs 8 & 18 E*

5. Lease Designation and Serial No.  
 SEE BELOW

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No. *Federal*  
 WEST CORBIN ~~UNIT~~ *11*

9. API Well No.  
*32-025-30521*

10. Field and Pool, or Exploratory Area  
 SOUTH CORBIN ~~FIELD~~ *Co*

11. County or Parish, State  
 LEA, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

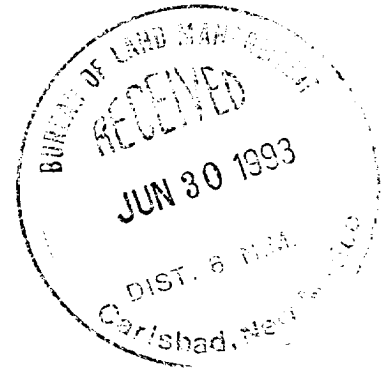
TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>REQUEST FOR EXTENSION</u>
	<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
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

AS PER CONVERSATION OF 6/16/93, REQUEST FOR ~~THREE (3)~~ <sup>two (2)</sup> YEAR EXTENSION DUE TO CONTINUED WORK ON LEASE: *to submit facility diagram + water dis.*

WELL NO	PRODUCING FORMATION	LEASE NO	SECTION	AVG WATER PRODUCED/PD/LEASE
5	WOLFCAMP	LC069420	17	
6	DELAWARE	LC069420	17	
7	SAN ANDRES	LC069420	17	
8	BONE SPRING	LC069420	17	
9	WOLFCAMP	LC069420	8	
10	WOLFCAMP	NM93	18	
11	WOLFCAMP	NM0997	8	
12	WOLFCAMP	NM93	18	
13	BONE SPRING	NM93	18	
14	WOLFCAMP	LC069420	17	
15	DELAWARE	NM93	18	



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

Signed *[Signature]* Title PRODUCTION ASSISTANT Date 6/17/93

(This space for Federal or State office use)

Approved by ORIG. SGD DAVID R. GLASS Title PETROLEUM Date JUN 24 1993

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side

Received of  
the  
Cashier

RECEIVED

1000  
1000

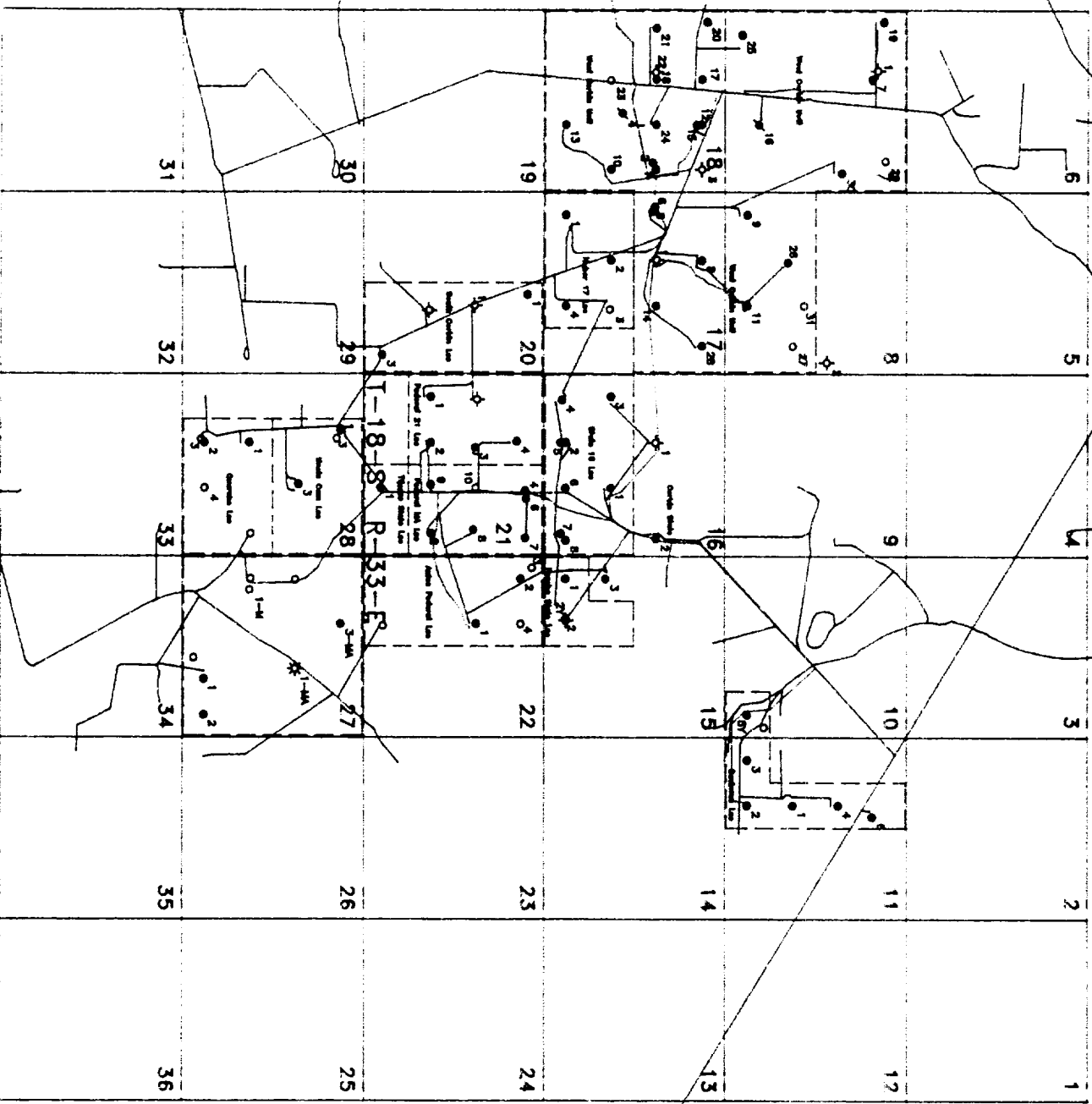
WEST CORBIN UNIT CONT.  
PAGE TWO

16	BONE SPRING/WIW	LC069420	7
17	DELAWARE	NM93	18
18	WOLFCAMP	NM93	18
19	BONE SPRING	LC069420	7
20	DELAWARE	NM93	18
21	WOLFCAMP	NM93	18
22	DELAWARE	NM93	18
24	DELAWARE	NM93	18
25	WOLFCAMP	L069420	7
26	WOLFCAMP	LC069420	8
28	WOLFCAMP	LC069420	17
30	BONE SPRING	LC069420	7

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62.6 BOWPD

T-18-S R-33-E



RECEIVED

NOV 19 1954  
U.S. DEPARTMENT OF AGRICULTURE  
WASHINGTON, D.C.