

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.
B-10938-36

7. Lease Name or Unit Agreement Name

EPNG Com

8. Well No.

1

9. Pool name or Wildcat

Blanco Mesa Verde

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.)

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☒

OTHER

2. Name of Operator

Meridian Oil Inc.

3. Address of Operator

P.O. Box 4289, Farmington, New Mexico 87499

4. Well Location

Unit Letter H : 990 Feet From The East Line and 1650 Feet From The North

Section 32

Township 30N

Range 8W

NMPM

San Juan

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
6155' GL

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. 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 intended to plug and abandon this well once the redrill is drilled and completed. A detailed sundry outlining the plug and abandonment procedure will be filed at that time.

RECEIVED

AUG 25 1989

OIL CON. DIV.
DIST. 3

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

SIGNATURE

Peggy Bradfield

TITLE

Regulatory Affairs

DATE

8-23-89

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY ERNIE BUSCH

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: