

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

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-504-10	

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- Name of Operator Meridian Oil Inc. Address of Operator PO Box 4289, Farmington, NM 87499 Location of Well UNIT LETTER <u>K</u> 1780 FEET FROM THE South LINE AND 1540 FEET FROM West LINE, SECTION 16 TOWNSHIP 32N RANGE 6W NMPM. 15. Elevation (Show whether DF, RT, GR, etc.) 6137' GL 12. County San Juan		7. Unit Agreement Name Allison Unit 8. Farm or Lease Name Allison Unit 9. Well No. 100 10. Field and Pool, or Wildcat Undes. Fruitland Coal
--	--	--

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

10-16-88 TD 2809'. Ran 8 jts. 4 1/2", 10.5#, K-55 casing liner, 487' set @ 2809'. Float shoe set @ 2809'. Top of liner hanger @ 2489'. Did not cement.

OCT 23 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 <u>Charles Gholson</u> Original Signed by CHARLES GHOLSON APPROVED BY _____ CONDITIONS OF APPROVAL, IF ANY:	TITLE <u>Regulatory Affairs</u> DEPUTY OIL & GAS INSPECTOR, DIST. #3 TITLE _____	DATE <u>10-26-88</u> OCT 23 1988 DATE _____
---	--	---