| Form 3160-5 (November 1983) (Formerly 9-331) | UNIT: STATES DEPARTMENT THE INT | SUBMIT IN TRIPLIC (Other instructions of exercise side) | Form approved Budget Bureau Expires August 5. LEASE DESIGNATION MI-C1579 | No. 1004-0135 |
|---------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| (Do not use this f | ORY NOTICES AND REPORT for proposals to drill or to deepen or program (as "APPLICATION FOR PERMIT—" for su | S ON WELLS lug back to a different reservoir. | 6. IF INDIAN, ALLOTTE | E OR TEIBE NAME |
| OIL X GAS WELL | OTHER | 7. UNIT AGREEMENT NAME | | |
| 2. NAME OF OPERATOR Fulton Enterpriz 3. ADDRESS OF OPERATOR | zes | 8. FARM OR LEASE NAME Meridian Federal 9. WELL NO. | | |
| At surface | Artesia W.M. port location clearly and in accordance with w.) and 990 FWL | JUN 2 8 1991 any State requi@pects.D. ARTESIA, OFFICE | 10. FIBLD AND POOL, OF | ke.7R.O.GB.SA |
| 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | | | Sec. 25, T16S., R28E 12. COUNTY OR PARISH 18. STATE | |
| 16. | Check Appropriate Box To Indicate | e Nature of Notice, Report, or C | other Data | |
| TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other) 17 DESCRIBE PROPOSED OR C Broposed work. If we nent to this work.) | PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS OMPLETED OPERATIONS (Clearly state all pertivel) is directionally drilled, give subsurface 1 | WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (NOTE: Report results Completion or Recompletion or Recompletion or Recompletion or Recompletions and measured and true vertical | REPAIRING W ALTERING CA ABANDONMEN of multiple completion o etion Report and Log fore including estimated date depths for all markers | sing T* |
| 5-29-91 Tag 6-12-91 Sho | t 25 sack plug at about 271 ged plug at 2557 feet of and pulled 1200 feet | | | |

6-15-91 Ran 1787 feet $4\frac{1}{2}$ casing and cenmented with 300 sack Halliburton Light 210 Halliburton Class C Neat cenment, and circulated 55 sacks to pit.

Form 3160-5

UNITED STATES

| (June 1990) | | T OF THE INTERIOR | May 3 1 1991 | Budget Bureau No. 1004-0135 Expires: March 31, 1993 |
|----------------------------------|------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|-----------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| | | LAND MANAGEMENT | G. C. S. | 5. Lease Designation and Serial No. NM-61579 |
| Do not use | SUNDRY NOTICES this form for proposals to dr Use "APPLICATION FOI | 6 If Indian Allottes on Tribe Name | | |
| | SUBMIT | 7. If Unit or CA, Agreement Designation | | |
| 1. Type of Well | Cor | | | |
| Z Oil Well [| Gas Well Other | 8. Well Name and No. | | |
| | Interprizes | Meridian Federal | | |
| 3. Address and T | | 1 | | |
| P. O. Box | • | 10. Field and Pool, or Exploratory Area | | |
| | ell (Footage, Sec., T., R., M., or Survey De | East RedLake, 7R, Q, GB, S. | | |
| 2310 | FNL and 990 FWL | | | 11. County or Parish, State |
| | | | | Sec. 25,T16S.,R28E |
| 12. CH | HECK APPROPRIATE BOX(|) TO INDICATE NATUR | E OF NOTICE, REP | ORT, OR OTHER DATA |
| TY | PE OF SUBMISSION | N | | |
| X | Notice of Intent | Abandonment | | Change of Plans |
| <u></u> | 1 | Recompletion | | New Construction |
| L | Subsequent Report | Plugging Back | k | Non-Routine Fracturing |
| | Final Abandonment Notice | Casing Repair | | Water Shut-Off |
| _ | Final Abandonment Notice | Altering Casis | ng | Conversion to Injection |
| | | □ Other | | (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form) |
| 13. Describe Propo give subsu | sed or Completed Operations (Clearly state all irface locations and measured and true vertical | pertinent details, and give pertinent date id depths for all markers and zones per | es, including estimated date of starr tinent to this work.)* | ting any proposed work. If well is directionally drilled |
| Set 25 s | ack plug at about 2710 | feet. [TAG] | | |
| | O feet of 7 inch casin | g | | |
| | feet of 4.1/2 casing. | <u>(\$75)</u> | | |
| | e cement to surface. | | | |
| | , | • ACCEP | ED FOR RECURS | |
| | | | | |
| | | M | AY 2 i ded | |
| | | ., ≠? 18 8 . | AD, NEW MEXIC : | |
| 14. I hereby certify | y that the foregoing is true and correct | Title 04/- | r e b | |
| | Federal or State office use) | inc | | |

Date _5/22/91 Approved by Same State Conditions of approval, if any:

RECEIVED

MAY 2 4 1991

OCT HOBBS OFFICE