

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR MERIDIAN OIL INC.		8. FARM OR LEASE NAME Apache "A" Federal	
3. ADDRESS OF OPERATOR 21 DESTA DRIVE, MIDLAND, TEXAS 79705		9. WELL NO. 3	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 990' FNL & 990' FEL, Sec. 35, T-19-S, R-29-E		10. FIELD AND POOL, OR WILDCAT Parkway (Delaware)	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3325 GL	
		12. COUNTY OR PARISH Eddy	
		13. STATE NM	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) Set & cmt 13 3/8" csg.	X

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

17. 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.)*

03-24-89 - Set 9 jts 13 3/8" 48# K-55 STC csg @ 359'. Cmt w/50 bbls fresh wtr ahead 375 sx Cl. "C" 2% CaCl₂, 1/4# Celloflake/sx, 10# Coalite/sx in first 150 sx. PD @ 5:30 a.m., 03-23-89. Cmt'd backside via 1" w/530 sx 3% CaCl₂, 12% D-53 12 stages. 6 bbls sodium silicate ahead of 50 sx Cl. "C". Waited 30", had 130' fill. Finished cementing to surf. Cir 5 sx to pit. Job complete @ 3:45 a.m., 03-24-89.

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

SIGNED R. L. Bradshaw TITLE Sr. Staff Env/Reg. Spec. DATE 03-28-89
(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

SJS
CARLSBAD, NEW MEXICO