

c15f

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or to backfill a different reservoir. Use Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other ☐ RECEIVED
2. NAME OF OPERATOR
Meridian Oil, Inc.
NEM Resources, Inc.
3. ADDRESS OF OPERATOR
P.O. Box 770, Artesia, NM 88210
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980 FSL & 660 FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

- | REQUEST FOR APPROVAL TO: | SUBSEQUENT REPORT OF: |
|---|--------------------------|
| TEST WATER SHUT-OFF <input type="checkbox"/> | <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | <input type="checkbox"/> |
| MULTIPLE COMPLETE <input type="checkbox"/> | <input type="checkbox"/> |
| CHANGE ZONES <input type="checkbox"/> | <input type="checkbox"/> |
| ABANDON* <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (other) <input type="checkbox"/> | <input type="checkbox"/> |

5. LEASE NM 6014
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Rocky Arroyo D Comm
9. WELL NO.
#2
10. FIELD OR WILDCAT NAME
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 4, T22S, R22E
12. COUNTY OR PARISH
Eddy
13. STATE
NM
14. API NO.
200 152 100600SI
15. ELEVATIONS (SHOW DF, KDB, AND WD)
4388 KB

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

- | | |
|--|-----------------|
| 1. Set CIBP @ 7300-35' cement on top | Perfs-7342-7348 |
| 2. Cut casing @ 4350 ± | PBTD-7914 |
| 3. Spot 40 Sxs @ stub - TAG - 50' in - 50' - out | 13 3/8-121-cir |
| 4. Spot 45 sxs @ 1120 - 1020 TAG | 9 5/8-1070-cir |
| 5. Spot 10 sxs @ 30' - surface | 5 1/2-9083 |
| | TOC @ 4421 |
| | Cement BO |
| | LOG |

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Mike Stone TITLE Agent DATE 2/8/93

(This space for Federal or State office use)
APPROVED BY _____ TITLE _____ DATE 2-17-93
CONDITIONS OF APPROVAL, IF ANY:

SEE ATTACHED