

Submit to Appropriate
District Office
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State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
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

APR 2 '90

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK					
1a. Type of Work: DRILL <input type="checkbox"/> RE-ENTER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/>					
b. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>					
2. Name of Operator Meridian Oil Inc.					
3. Address of Operator 21 Desta Dr., Midland, TX 79705					
4. Well Location Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West Line Section 12 Township 24 South Range 24 East NMPM Eddy County					
10. Proposed Depth 9455' PBTD					
11. Formation Strawn					
12. Rotary or C.T. Plug Back					
13. Elevations (Show whether DF, RT, GR, etc.) 4120.1' GR.2993' DF.					
14. Kind & Status Plug. Bond Blanket					
15. Drilling Contractor					
16. Approx. Date Work will start 01 April 1990					
17. PROPOSED CASING AND CEMENT PROGRAM					
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP

The well is to be plugged back and recompleted in the Strawn limestone according to the attached procedure.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE Robert L. Bradshaw TITLE Sr. Staff Env./Reg. Spec. DATE 30 March 1990

TYPE OR PRINT NAME Robert L. Bradshaw

TELEPHONE NO. 915/686-5678

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____ DATE APR 4 1990

CONDITIONS OF APPROVAL, IF ANY: