

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

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

RECEIVED
OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088
SEP 15 1989

O. C. D.
ARTESIA OFFICE

API NO. (assigned by OCD on New Wells)

30 015 22441

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☐

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☐

b. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER ☐

SINGLE
ZONE ☐

MULTIPLE
ZONE ☐

7. Lease Name or Unit Agreement Name

Bird Com.

2. Name of Operator

Meridian Oil Inc. /

8. Well No.

1

3. Address of Operator

21 Desta Drive, Midland, Texas 79705

9. Pool name or Wildcat

North Loving

4. Well Location

Unit Letter G : 1880 Feet From The North Line and 1980 Feet From The East Line

Section 12 Township 23 South Range 27 East NMPM Eddy County

10. Proposed Depth

10,300' (PBD)

11. Formation

Wolfcamp

12. Rotary or C.T.

13. Elevations (Show whether DF, RT, GR, etc.)

3501' GR

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

16. Approx. Date Work will start

9/25/89

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17 1/2"	13 3/8"	48	398'	455	Surface
12 1/4"	9 5/8"	36	3,500'	1563	Surface
8 3/4"	7"	26	10,789'	460	8510'

Abandon Atoka Perfs. (11,273' - 11,296', 10 Holes) and Strawn Perfs. (11,027' - 11,106', 31 Holes)
Set CIBP @ 10,350' and spot 50' Cmt. plug on CIBP.
RIH w/ 5" Csg. gun and perf Wolfcamp w/ 90° phasing @ 9976' - 10,212' using 2 JSPF (98 Shots).
RIH w/ 9900' 2 3/8" 4.7# J-55 Tbg. Set Pkr. @ 9900'. Stimulate as necessary.

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 3-15-90
UNLESS DRILLING UNDERWAY

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

9/02/89

TYPE OR PRINT NAME

Robert L. Bradshaw

(915)
TELEPHONE NO. 686-5678

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

APPROVED BY

TITLE

DATE

SEP 15 1989

CONDITIONS OF APPROVAL, IF ANY: