Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Girec				
DISTRICT I P.O. Box 1980, Hobbs NM 88240 OIL CONSERVATION DIVISION P.O. Box 2088			WELL API NO.	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexic		30-015-28066 5. Indicate Type of Lease	
DISTRICT III		/	STATE	FEE X
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.	1
(DO NOT USE THIS FORM FOR PRO		OR PLUGE PACK TO A	7. Lease Name or Unit Agreement No.	
(FORM	RVOIR. USE "APPLICATION FOR PE C-101) FOR SUCH PROPOSALS.)	:RMII" 	TIRANO CNG STATE 13	55
1. Type of Well: OIL GAS WELL X WELL	OTHER		_).
2. Name of Operator MERIDIAN OIL INC.	·		8. Well No. NO. 4	-riCE
3. Address of Operator			9. Pool name or Wildcat	
P.O. 51310, Midland, TX 7 4. Well Location		4000	WILLOW LAKE (DELAWAF	(E)
Unit Letter K : 1980	Feet From The SOUTH	Line and	Feet From The WEST	Line
Section 36		Range 28E ther DF, RKB, RT, GR, et	NMPM EDDY	County
	2949.9	mer Dr, RRB, RI, GR, et	с.)	
•	opropriate Box to Indicate		• •	_
NOTICE OF II	NTENTION TO:	501	SSEQUENT REPORT (JF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	☐ ALTERING CASIN	ıg 📙
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING		DONMENT
PULL OR ALTER CASING		CASING TEST AND C	ement job 📖 & Reperf'd in Upper delaw:	ARE -
OTHER:	L	OTTICK.		
 Describe Proposed or Completed Op work) SEE RULE 1103. 	erations (Clearly state all pertinent d	etails, and give pertinent da	ites, including estimated date of starting	g any proposed
1/5/95: SET CIBP @ 4880'.		335'. CIRC. HOLE W	KCL WATER AND HCL	
ACID. ACIDIZE W/500 GLS 7. 1/6/95: FRAC W/3600 GLS 1/7/95: CLEAN OUT TO CIBP	25# XL GEL AND 3400 LBS	OF 20/40 SUPER LC	RC SAND.	
177700. OLLAN OUT TO OID!	e 4000 . Thi Wyrnob. Tha	AND OLI FRIT.		
OLD PERFORATIONS: 4896'-4 PRODUCING INTERVALS: 4830				
TOTAL DEPTH: 5205' PBTD: CIBP @ 4880'				
I hereby certify that the information above is	true and complete to the best of my knowled	dge and belief.		
SIGNATURE	u de la r	TILE REGULATORY AS	DATE 1/9/	95
TYPE OR PRINT NAME DONNA WILLIA	MS		TELEPHONE NO. 915	i-688-6943
(This space for State Use)	NED BY THE W CHE			
DISTRICT II S	ENED BY TIM W. GUM UPERVISOR	etti e	FEB	9 1995