NM CIL CONS. (SSION Drawer DD Artesia, NM 88210

Form 3160-5

UNITED STATES

form 3160-5 June 1990)	DEPARTMENT OF THE INTERIOR				FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993	
	BUREAU OF I	AND MANAGEME	NT		 Lease Designation and Serion NMO31963 	ial No.
	SUNDRY NOTICES form for proposals to dri Use "APPLICATION FOR	Il or to deepen or re	entry to a different		6. If Indian, Allottee or Tribe	: Name
	SUBMIT	IN TRIPLICATE	KËLEIVE	1	7. If Unit or CA, Agreement	Designation
1. Type of Well Oil Well Well	Other		AUG - 5 1	1993 -	B. Well Name and No.	1 #0
2 Name of Operator Merit Energ			C. (. D	5 S	Sundance Fede D. API Well No. 30-015-27492	rai #9
	Drive, Suite 500,		251 (214) 701 -	-8377	0. Field and Pool, or Explora	
	age, Sec., T., R., M., or Survey De and 1980' FNL R31E	scription)		1	Sand Dunes W. County or Parish, State Eddy, NM	, Delawar
2. CHECK	APPROPRIATE BOX() TO INDICATE N	ATURE OF NOTIC	E, REPORT	, OR OTHER DATA	A
TYPE OF	TYPE OF SUBMISSION TYPE OF ACTION					
Notice	of Intent		idonment mpletion		Change of Plans New Construction	
Subseq	quent Report		ging Back ng Repair		Non-Routine Fracturing Water Shut-Off	
Final /	Abandonment Notice		ing Casing		Conversion to Injection Dispose Water (Note: Report results of multiple of Completion or Report results of Multiple of Completion Report results of Multiple of Completion or Report results of Report results of Multiple of Completion or Report results of Report res	
Merit Energ We estimate casing at 4 Also, we wi permitted 1 in the area	completed Operations (Clearly state all cations and measured and true vertice by hereby requests the base of salt 080 instead of the sh to change the s 2 1/4". This chan This change sho mes will be altere	approval to cha to be at 3780'. originally pro ize of the inte ge was made for uld in no way c	nge the setting We therefore posed depth of rmediate casing cost saving re ause problems w	depth of wish to so 4200'. g hole to easons and with cemen	the intermedia et the intermed 11" instead of due to washout ting operations	te casing iate the common
4. I hereby certify that the	e foregoing is true and correct	Title Regu	latory Manager		Date 7-15-93	
(This space for Eedera	or State office use) SGD.) JOE G. I AR	A Title	leum Endass		Date AUG 0 3	1993
Conditions of approval	, if any:					

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.