

Form 1160-5  
(November 1983)  
(Formerly 9-331)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	3. LEASE DESIGNATION AND SERIAL NO. SF-081098
2. NAME OF OPERATOR Meridian Oil Inc.	6. OF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 4289, Farmington, NM 87499	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 905'N, 935'W	8. FARM OR LEASE NAME Riddle
14. PERMIT NO.	9. WELL NO. 251
15. ELEVATIONS (Show whether OP, ST, OR, etc.) 6216'GL	10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal
	11. SEC., T., R., M., OR BLK. AND SUBST. OR AREA Sec. 4, T30N, R9W NMPM
	12. COUNTY OR PARISH 13. STATE San Juan NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>
(Other) Revision <input checked="" type="checkbox"/>		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. LASH RISE, HOUSED 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.\*

Attached is a copy of the C102 showing the revised pool & dedication.

100020 PM 2:09  
FARMINGTON, NEW MEXICO

RECEIVED  
JAN 26 1989  
OIL & GAS DIV.  
B.L.M.

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

SIGNED

TITLE Regulatory Affairs

DATE

12-22-88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

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.

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-102  
Revised 10-1-78

All distances must be from the outer boundaries of the Section.

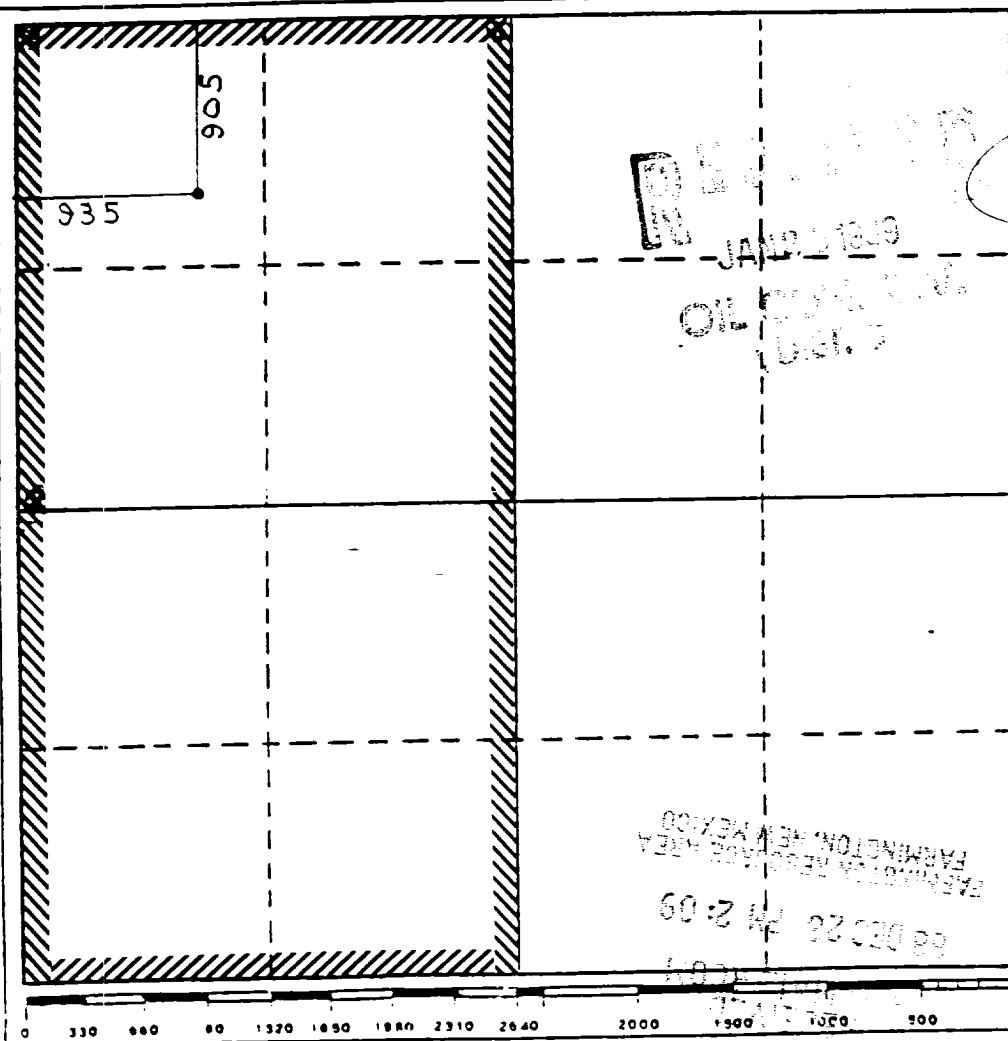
Operator <b>Meridian Oil Co.</b>			Lease <b>Riddle (SF-081098)</b>		Well No. <b>251</b>
Unit Letter <b>D</b>	Section <b>4</b>	Township <b>T30N</b>	Range <b>R9W</b>	County <b>San Juan</b>	
Actual Footage Location of Wells <b>905</b> feet from the <b>North</b> line and <b>935</b> feet from the <b>West</b> line					
Ground Level Elev. <b>6216</b>	Producing Formation <b>Fruitland</b>		Pool <b>Basin</b>		Dedicated Acreage <b>322.70</b> acres

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Division.



CERTIFICATION

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

Name

*R. Howard Daggett*  
**Drilling Clerk**

Position

**Meridian Oil Inc.**

Company

**12-22-88**

Date

I hereby certify that the well location shown on this plat was located from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

**Registered Professional Land Surveyor**

Date Surveyed

**April 11, 1988**

Registered Land Surveyor

**R. Howard Daggett**

*R. Howard Daggett*  
Certificate No.

**9679**