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

Form C-103  
Revised 10-1-73

|                                |                                         |
|--------------------------------|-----------------------------------------|
| 5a. Indicate Type of Lease     |                                         |
| State <input type="checkbox"/> | Fee <input checked="" type="checkbox"/> |
| 3. State Oil & Gas Lease No.   |                                         |

**RECEIVED**

**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" (FORM C-101) FOR SUCH PROPOSALS.)

**OIL CON. DIV.**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                             |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER-<br>Name of Operator<br><b>Meridian Oil Inc.</b><br>Address of Operator<br><b>PO Box 4289, Farmington, NM 87499</b><br>Location of Well<br>UNIT LETTER <b>G</b> 2480    FEET FROM THE <b>North</b> LINE AND    1450    FEET FROM<br>THE <b>East</b> LINE, SECTION <b>18</b> TOWNSHIP <b>32N</b> RANGE <b>6W</b> NMPM.<br>15. Elevation (Show whether DF, RT, GR, etc.)    6507' GL<br>12. County    San Juan |  | 7. Unit Agreement Name<br><b>Allison Unit</b><br>8. Farm or Lease Name<br><b>Allison Unit</b><br>9. Well No.<br><b>111</b><br>10. Field and Pool, or Wildcat<br><b>Basin Fruitland Coal</b> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

|                                                |                                           |                                                             |                                               |
|------------------------------------------------|-------------------------------------------|-------------------------------------------------------------|-----------------------------------------------|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>                      | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOB <input type="checkbox"/>         | OTHER <input type="checkbox"/>                |

7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

12-15-88    Spudded well at 8:30 pm 12-15-88. Drilled to 233', Ran 5 jts, 9 5/8", 32.3#, H-40 surface casing set at 233', Cemented with 150 sks, Class "B" with 1/4#/sk, gel-flake and 3% calcium chloride (177 cu.ft.), circulated to surface, WOC 12 hrs., Tested 600#/30 minutes, held ok.

12-19-88    TD 3011', Ran 95 jts, 7", 20.0#, K-55 intermediate casing, 3000' set @ 3011', Cemented with 450 sks, Class "B" 65/35 with 6% gel, 2% calcium chloride, 1/2 cu.ft, perlite/sx (878 cu.ft.), followed by 100 sx, Class "B" with 2% calcium chloride (118 cu.ft.), WOC 12 hours, Held 1200#/30 min, Circulated to surface.

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

SIGNED  TITLE Regulatory Affairs DATE 12-21-88

Original Signed by FRANK T. CHAVEZ

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE **DEC 22 1988**

CONDITIONS OF APPROVAL, IF ANY: