

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING  
OFFICE FOR NUMBER  
OF COPIES REQUIRED  
(Other instructions on reverse  
side)

BLM Roswell District  
Modified Form No.  
NM060-3160-4

5. LEASE DESIGNATION AND SERIAL NO.  
**NM-12611**

**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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL  GAS WELL  OTHER

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR  
**Meridian Oil Inc.**

8. FARM OR LEASE NAME  
**Myers B**

3. ADDRESS OF OPERATOR  
**P.O. Box 51810, Midland, TX 79710-1810**

3a. AREA CODE & PHONE NO.  
**915-686-5600**

9. WELL NO.  
**5**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

10. FIELD AND POOL, OR WILDCAT  
**Jalmat (Tansill, Yates, 7 Rv)**

**Unit F 1980' FNL & 1980' FWL**

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

**Sec. 11, T24S, R36E**

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
**3382.5' GR**

12. COUNTY OR PARISH  
**Lea**

13. STATE  
**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   
FRACTURE TREAT   
SHOOT OR ACIDIZE   
REPAIR WELL   
(Other)

PULL OR ALTER CASING   
MULTIPLE COMPLETE   
ABANDON\*   
CHANGE PLANS

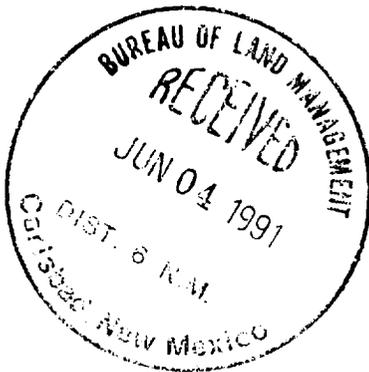
WATER SHUT-OFF   
FRACTURE TREATMENT   
SHOOTING OR ACIDIZING   
(Other) Add pay

REPAIRING WELL   
ALTERING CASING   
ABANDONMENT\*

(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED 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.)\*

See Attachment.



FILED FOR RECORD  
*Ad*

JUN 14 1991

CORRAL BLVD. NEW MEXICO

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

SIGNED

*Cornie Malk*

TITLE

**Reg. Analyst**

DATE

**5/28/91**

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

RECEIVED

JUN 20 1991

CHS  
HOES 344-22