

UNITED STATES  
DEPARTMENT OF THE INTERIOR **N.M. Oil Cons. Division**  
BUREAU OF LAND MANAGEMENT **P.O. Box 1980**

**SUNDRY NOTICES AND REPORTS ON WELLS** **Hobbs, NM 88241**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT - " for such proposals

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

5. Lease Designation and Serial No.  
**NM96781**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
**Aztec 22 Federal # 1**

9. API Well No.

10. Field and Pool, or exploratory Area

11. County or Parish, State

**Lea NM**

**SUBMIT IN TRIPLICATE**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

**Meridian Oil Inc.**

3. Address and Telephone No.

**P.O. Box 51810, Midland, TX 79710-1810 915-688-6943**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

**1980' FNL & 1980' FWL  
Sec. 22, T18S, R33E**

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☐ Other **Facility Diagram**

☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

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

13. 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.)\*

Please find attached a current site facility diagram.

RECEIVED

SEP 16 2 43 PM '96

BUREAU OF LAND MGMT  
HOBBS, NM

(ORIG. SGD.) DAVID R. GLASS

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

Signed

Title **Regulatory Compliance**

Date **9/13/96**

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: