

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. <u>32-025-24908</u>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name TONTO 15 STATE
8. Well No. # 2
9. Pool name or Wildcat AIRSTRIP BONE SPRING, NORTH
10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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.)	
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	
2. Name of Operator MERIDIAN OIL INC.	
3. Address of Operator P.O. Box 51810, Midland, TX 79710-1810	
4. Well Location Unit Letter <u>H</u> : <u>1880</u> Feet From The <u>NORTH</u> Line and <u>550</u> Feet From The <u>EAST</u> Line Section <u>15</u> Township <u>18S</u> Range <u>34E</u> NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: PARAFFIN TREATMENT <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. 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.

1. MIRU PU. BLEED PRESSURE OFF OF WELL. ND WH. NU BOP.
2. POOH W/RODS AND PMP. RELSE TAC @ 9460'. POOH W/ TBG.
3. PU AND RIH W/PKR ON 2 7/8" TBG TO 9500. SET PKR AT 9500
4. RU CHEMICAL CO. MIX AND PMP 2 DRUMS OF PAO-0072F + 6 DRUMS OF A-SOL 38 + 4 GLS DMO-0046F DOWN TBG. FLUSH W/24 BBLs OF CLEAN LEASE OIL. RD CHEMICAL CO. SI OVERNIGHT.
5. RU SWAB UNIT AND SWAB BACK LOAD
6. RLSE PKR AT 9500 AND POOH W/TBG AND PKR. RIH W/PRODUCTION EQUIPMENT. ND BOP NU WH. RDMO.

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

SIGNATURE Donna Williams TITLE PRODUCTION ASST. DATE 1/14/94

TYPE OR PRINT NAME DONNA WILLIAMS

TELEPHONE NO. 915-688-6943

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT I SUPERVISOR TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: