

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N. M. OIL GENE. COMMISSION
P. O. BOX 1930
HOBBS, NEW MEXICO 88240

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

SUBMIT IN TRIPLICATE

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
~~MERIDIAN OIL INC.~~ *Southland Royalty Co.*

3. Address and Telephone No.
P.O. BOX 51310 MIDLAND, TEXAS 79710-1810 915-688-6800

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SECTION: 17 *660/S & 1980/E*
Unit 9
T-18-S, R-33-E

5. Lease Designation and Serial No.
NM26692

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
HUBER 17 FEDERAL *No. 4*

9. API Well No.
30-025-30787

10. Field and Pool, or Exploratory Area
SOUTH CORBIN FIELD

11. County or Parish, State
LEA, NM

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

| TYPE OF SUBMISSION | TYPE OF ACTION | |
|---|---|--|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment | <input type="checkbox"/> Change of Plans |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Plugging Back | <input type="checkbox"/> Non-Routine Fracturing |
| | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> Water Shut-Off |
| | <input type="checkbox"/> Altering Casing | <input type="checkbox"/> Conversion to Injection |
| | <input checked="" type="checkbox"/> Other REQUEST FOR EXTENSION | <input type="checkbox"/> 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.)

AS PER CONVERSATION OF 6/16/93, REQUEST FOR *TWO (2)* ~~THREE (3)~~ YEAR EXTENSION/DUE TO CONTINUED WORK ON LEASE: *to SUBMIT FACILITY DIAGRAM & WATER DISPOSAL*

| WELL NO | PRODUCING FORMATION | LEASE NO | SECTION | AVG WATER PRODUCED/PD/LEASE |
|---------|---------------------|----------|---------|-----------------------------|
| 1 | BONE SPRING | NM26692 | 17 | |
| 2 | DELAWARE | NM26692 | 17 | |
| ④ | DELAWARE | NM26692 | 17 | |

12.3 BOWPD

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

Signed

Title

PRODUCTION ASSISTANT

Date 6/17/93

(This space for Federal or State office use)

Approved by

(ORIG. SGD.) JOE G. LARA

Title

PETROLEUM ENGINEER

Date

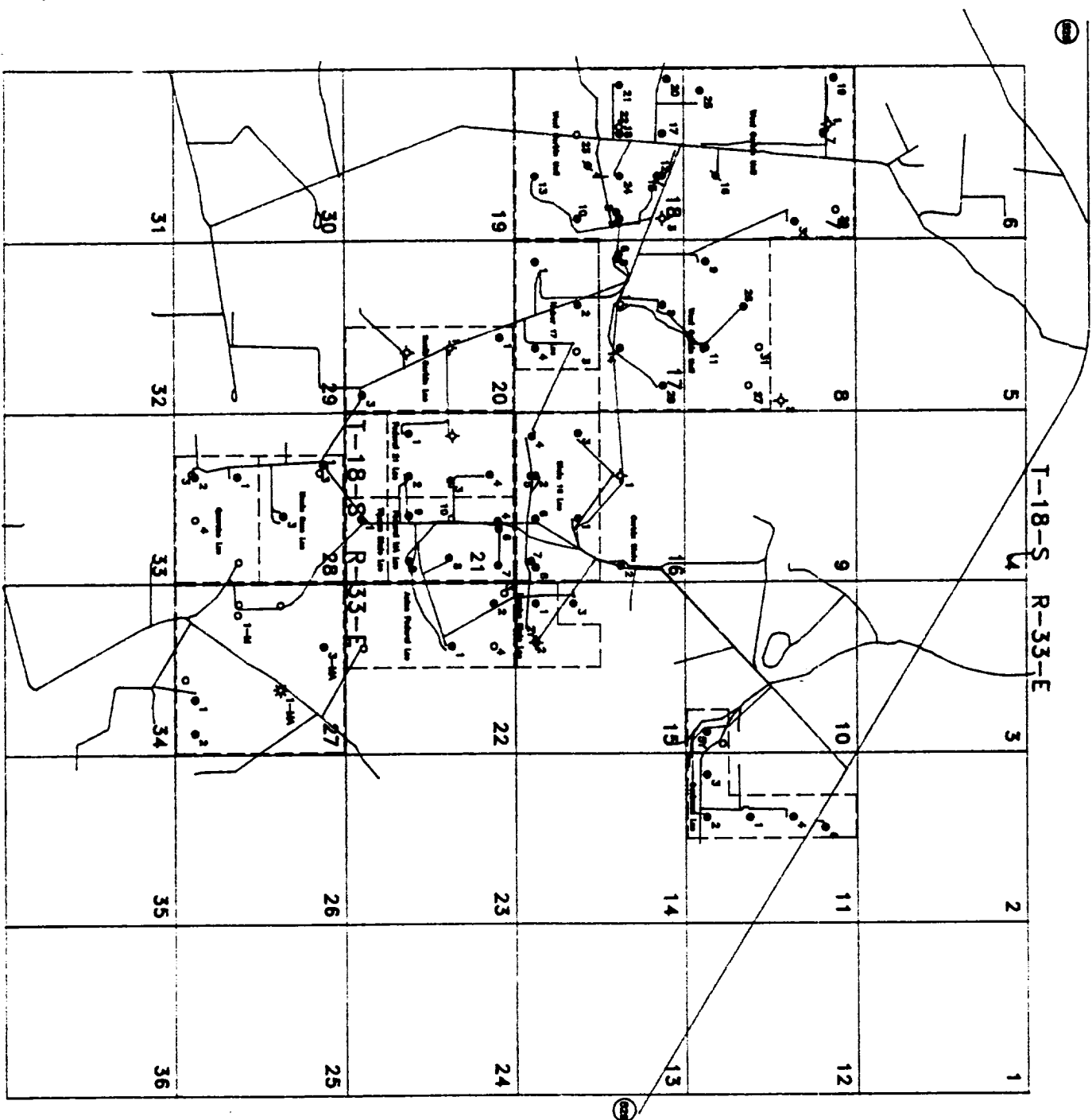
JUL 06 1993

Conditions of approval, if any:

RECEIVED

JUL 12 1963

AMERICAN
LIBRARY



RECEIVED

1992