

Form 3160-5
(July 1989)
(Formerly 9-331)

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-12568-A

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.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR
Meridian Oil Inc.

3. ADDRESS OF OPERATOR
21 Desta Dr., Midland, TX 79705

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

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1650' FNL & 330' FEL unit 74

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Bondurant Fed. Com.

9. WELL NO.
2

10. FIELD AND POOL OR WILDCAT
Buffalo (Bone Spring)

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA
Sec. 1, T19S, R32E

14. PERMIT NO.
Approved 8/10/90

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3687' GR.

12. COUNTY OR PARISH
Lea

13. STATE
NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

(Other) **Set & Cement Casing**

(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.)*

Spud well @1830 hrs. on 9/04/90.

Set 8-5/8" 24# K-55 STC csg @1515'. Cmt w/500 sx Class C Lite w/5 pps salt, 1% CaCl2, 1/4 pps Celloseal.

Tail w/200 sx Class C w/2 CaCl2. Circulate 200 sx to surface. PD @0745 hrs on 9/06/90.

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

SIGNED

[Signature]

TITLE

Sr. Staff Env./Reg. Spec.

DATE

17 September 90

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

***See Instructions on Reverse Side**