Form 3160-5 (June 1990)

F.U. BUX 1980 HOBBS, NEW MEXICO 88240

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED Budget Bureau No. 1004-0135

12

BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS		Expires: March 31, 1993 5. Lease Designation and Serial No. NMO997/LC069420
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		6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation
1. Type of Well Oil Well Well Other 2. Name of Operator MERIDIAN OIL INC.		8. Well Name and No. WEST CORBIN
		FEDERAL LEASE 9. API Well No.
3. Address and Telephone No. P.O. Box 51810 Midland, TX 79710 915-688-6943		10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SEC. 8 & 17		CORBIN FIELD
T18S, R33E		11. County or Parish, State LEA COUNTY, NM
	s) TO INDICATE NATURE OF NOTICE, REPOR	RT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Abandonment Recompletion	Change of Plans New Construction
Subsequent Report	Plugging Back Casing Repair	Non-Routifie Fracturing Water Shut-Off
Final Abandonment Notice	Altering Casing Other REQUEST TO VENT GAS DUE TO PLANT TURNAROUND	Conversion to Injection Dispose Water
WE RESPECTFULLY REQUEST TO VENT TH TURNAROUND OF THE CONOCO FACILITY LO	Il pertinent details, and give pertinent dates, including estimated date of starting call depths for all markers and zones pertinent to this work.)* E CASINGHEAD GAS ON THE BELOW WELLS DUE T CATED AT MALJAMAR, NM FROM 12 AM APRIL 18 ATE CAUSING DETRIMENTAL DAMAGE AND LONG TE	Completion or Recompletion Record and Toform.) B any proposed work Ti. well is Directionally drilled, O THE SCHEDULED PLANT 1. 1994 THRU 12 AM APRIL 21.
WEST CORBIN FEDERAL # 11 BATTERY CO WEST CORBIN # 26 SEC. 8 LC06942	二二二	
WEST CORBIN # 11 SEC. 8 NM 0997 WEST CORBIN # 28 SEC. 17 NM 0997 WEST CORBIN # 14 SEC. 17 NM 0997		S II II O S VED
A HYDROGEN SULFIDE TEST WAS PERFORM 1994. THIS TEST WAS DONE WITH 4LL S	MED BY INDIAN FIRE AND SAFTY ON THE WELLS AN ENSIDYNE TUBES AND THE LEVEL OF H2S WAS O	ND BATTERY ON JANUARY 10, PPM.
14. I hereby certify that the foregoing is true and correct Signed	IAMS DDODUCTION ASSISTANT	
(This space for Federal or State office use) Approved by Sagangal Sagangal	Datangaran Radinasa	Date 4/5/94
Conditions of approval, if any:	Title	Date

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.