

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.
30-025-31168

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
Federal Ut. NM91067X

7. Lease Name or Unit Agreement Name

East Corbin Delaware Unit

8. Well No.
4 WIW

9. Pool name or Wildcat
West Corbin Delaware

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 ☐ GAS WELL ☐ OTHER **Injection**

2. Name of Operator
Meridian Oil Inc.

3. Address of Operator
P.O. 51310, Midland, TX 79710-1810

4. Well Location
Unit Letter **P** : **660'** Feet From The **South** Line and **460'** Feet From The **East** Line

Section **16**

Township **18S**

Range **33E**

NMPM Lea

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3866'

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: **Injection Profile** ☐

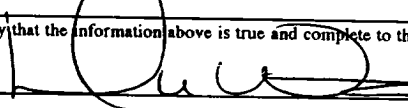
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Well was formerly the State '16' well no. 8.

**Tubing is set @ 5175'.
Guiberson G6 packer is set @ 5175'.**

**Total Depth: 5505'
PBTD: 5445'**

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

SIGNATURE  TITLE **Regulatory Compliance** DATE **3/26/96**

TYPE OR PRINT NAME **Donna Williams**

TELEPHONE NO. **915-688-6943**

(This space for State Use)

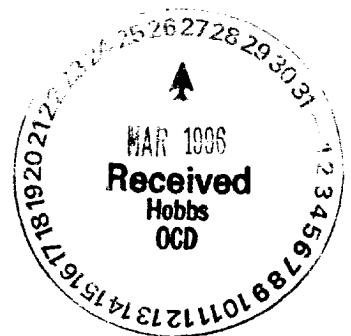
ORIGINAL SIGNATURE

APPROVED BY  TITLE **Donna Williams** DATE **3/26/96**

CONDITIONS OF APPROVAL, IF ANY:

FCBA





UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.

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)

660' FSL & 1980' FEL 460/E
SEC. 16, T18S, R33E

Unit: P

5. Lease Designation and Serial No.

State

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

NMNM91067X

8. Well Name and No.

EAST CORBIN NO. 4
DELAWARE UNIT

9. API Well No.

30-025-31168

10. Field and Pool, or exploratory Area

WEST CORBIN DELAWARE

11. County or Parish, State

LEA NM

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 Convert to injection
☐ 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.)*

As part of the East Corbin Delaware Waterflood Project, this well was converted to an injection effective July 5, 1995. Please find the attached chart.

Log @ 400 E 1/2 S 1000 ft

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

Signed

[Signature]

Title

REGULATORY COMPLIANCE

Date

8/11/95

(This space for Federal or State office use)

Approved by

Title

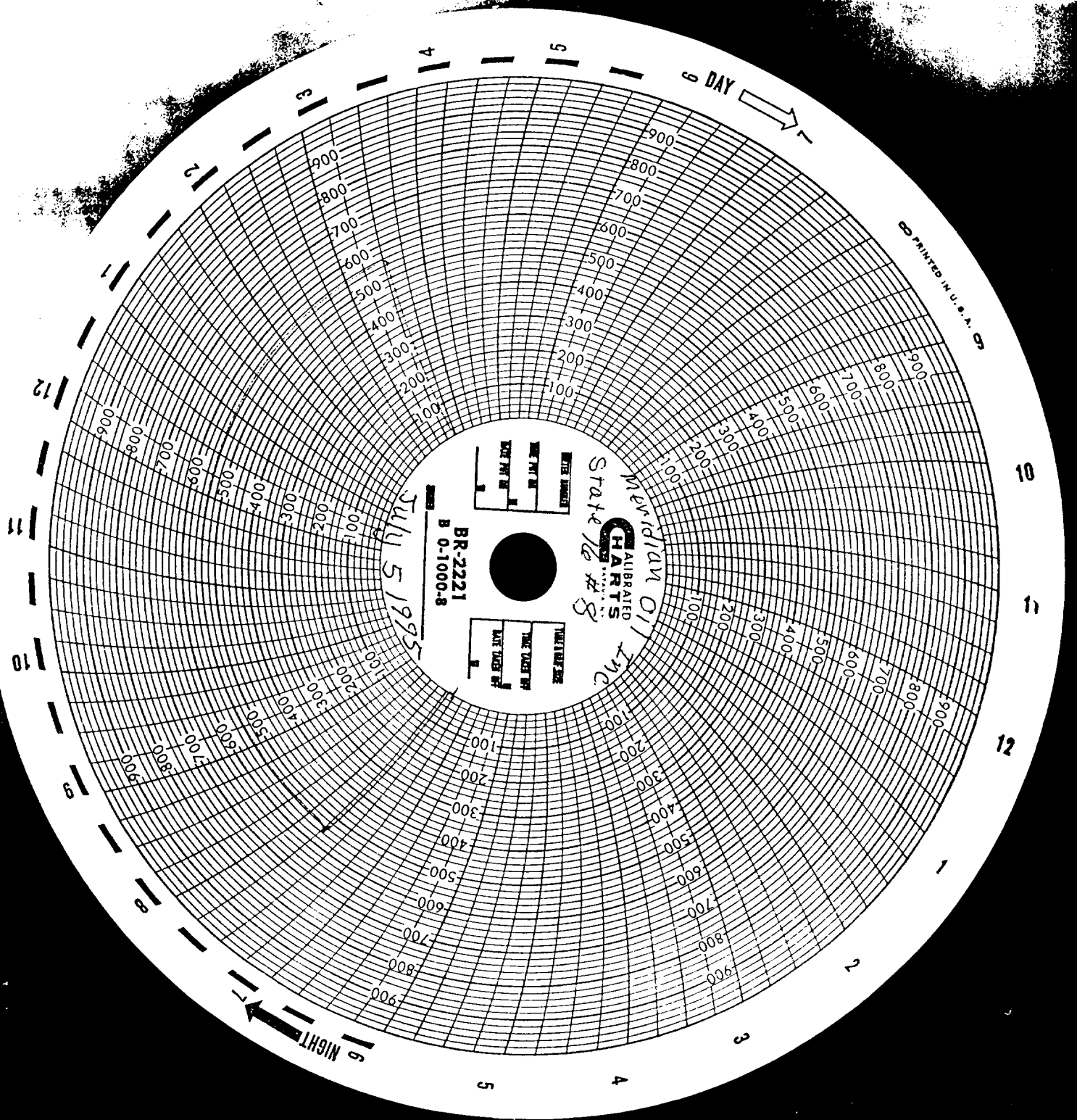
Date

Conditions of approval, if any:

RECEIVED

AUG 14 1955

U.S. HOUSE OF
REPRESENTATIVES
OFFICE



RECEIVED

AUG 14 1965

U.S. HOUSE
OF REPRESENTATIVES