Submit 3 Copies to Appropriate District Office	Energy, Minerals and Natural Resources Department  OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe. New Mexico, 87504-2088		Form C-103 Revised 1-1-89		
DISTRICT I P.O. Box 1980, Hobbs, NM 88240			WELL API NO. 30-025-31392		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease  STATE X FEE		
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas Lease No. LH-1840		
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:  OL ON			7. Lease Name or Unit Agreement Name  CORBIN STATE		
WELL X WELL  2. Name of Operator	OTHER				
MERIDIAN OIL INC.			8. Well No.		
3. Address of Operator			9. Pool name or Wildcat		
P.O. Box 51810, Midland, TX 79710-1810			SOUTH CORBIN WOLFCAMP		
4. Well Location  Unit Letter H : 5	510 Feet From The EAST	Line and	1980 Feet From The NORTH Line		
Section 16	10. Elevation (Show whether I	nge 33-E 1 DF, RKB, RT, GR, etc.)	NMPM LEA County		
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data					
NOTICE OF IN			SEQUENT REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING			
PULL OR ALTER CASING CASING TEST AND C			MENT JOB		
OTHER:		OTHER: ADDED PERFS & ACIDIZED X			
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.					
PARAFFIN INHIBITOR AND FOLL 8-20-92 TO 8-22-92 SWAB 8-23-92 TO 8-26-92 SET CF 8-27-92 TO 8-29-92 DRLG CF 8-30-92 PERF 10856-10932	AMP 11040-11080' 2SPF (82 I OWED W/4000 GAL 15% PENT/ TEST, TRACE OF OIL, NON PROI @ 10950'.SQZ PERFS 11040 DUT CR, CMT AND CIPB @ 11150'.' 'W/4400 GALS PENTAL 100.	AL 100+123 BS. DUCTIVE. SET CIPB TO 11080' W/550 '.	@ 11150'. SXS H CEMENT.		
1 1 1 1	ue and complete to the best of my knowledge and	belief.  PRODUCTION ASST	Г 12-15-92		

SIGNATURE - CLA LI KILLY	PRODUCTION ASST.	DATE 12-15-92
TYPE OR PRINT NAME PAT HENRY		<u>ТЕГЕРНОМЕ NO.</u> 915 688-6899
ORIGINAL SIGNED BY JERRY SEXTON (This space for State Use) BISTINGT I SUPERVISOR		DEC 1 8 '92
APPROVED BY	—— тте ————	DATE
CONDITIONS OF APPROVAL, IF ANY:		