

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.
30-025-31392

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
LH-1840

7. Lease Name or Unit Agreement Name

SOUTH CORBIN STATE

8. Well No.
2

9. Pool name or Wildcat
SOUTH CORBIN WOLFCAMP

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

2. Name of Operator
MERIDIAN OIL INC.

3. Address of Operator
P.O. Box 51810, Midland, TX 79710-1810

4. Well Location
Unit Letter H : 510 Feet From The EAST Line and 1980 Feet From The NORTH Line

Section 16 Township 18-S Range 33-E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
11,550'

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: EXTEND DRLG PERMIT 6 MONTHS & Change Lease name ☒

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.

C-101 APPLICATION FOR PERMIT TO DRILL EXPIRES 3-23-92. REQUEST A 6 MONTHS EXTENSION. PLANS ARE TO SPUD THIS LOCATION DURING THE MONTH OF APRIL 1992.

ALSO, AMEND NAME FROM CORBIN STATE NO. 2, TO SOUTH CORBIN STATE NO. 2.

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

SIGNATURE Maria L. Perez TITLE PRODUCTION ASST. DATE 3-11-92

TYPE OR PRINT NAME MARIA L. PEREZ

TELEPHONE NO. 915-688-6906

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

MAR 16

Expires 9-23-92

RECEIVED
MAR 13 1992
OCD HOBBS OFFICE