

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
Other instructions on
reverse side

Form approved.
Budget Bureau No. 1004-0
Expires August 31, 1985

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒

DEEPEN ☐

PLUG BACK ☐

b. TYPE OF WELL

OIL

WELL ☒

GAS

WELL ☐

OTHER ☐

SINGLE

ZONE ☐

MULTIPLE

ZONE ☐

2. NAME OF OPERATOR

Meridian Oil Inc.

3. ADDRESS OF OPERATOR

P. O. Box 51810 Midland, Tx. 79710-1810

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)
At surface

F, 1650' FNL & 2210' FWL

At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

9 miles southeast of Maljamar, NM

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST

PROPERTY OR LEASE LINE, FT.

*Also to nearest drig. unit line, if any,

1650'

16. NO. OF ACRES IN LEASE

440

17. NO. OF ACRES ASSIGNED

TO THIS WELL

40

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL DRILLING COMPLETED.

OR APPLIED FOR, ON THIS LEASE, FT.

667'

19. PROPOSED DEPTH

3800'

20. ROTARY OR CABLE TOOLS

Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

3703.3' GR

22. APPROX. DATE WORK WILL START

11/3/91

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12-1/4	8-5/8	24	600'	400 sx - Circ.
7-7/8	5-12/	15.5	3800'	1300 sx - Circ.

MUD PROGRAM: 0- 600 Fresh water gel and lime; 600 - 3800' salt water w/MW 9.8-10.2. No abnormal pressures or temperatures expected.

BOP PROGRAM: 10" 3-M BOP stack to be installed on the 8-5/8" and left for remainder of drilling.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give any preventive program, if any.

24.

SIGNED

Maria L Perez

TITLE

Production Assistant

DATE

10-14-91

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

DATE

10/31/91

CONDITIONS OF APPROVAL, IF ANY:

APPROVAL SUBJECT TO

GENERAL REQUIREMENTS AND

SPECIAL STIPULATIONS

*See Instructions On Reverse Side

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HOLERS OFFICE

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Submit to Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator MERIDIAN OIL INC.			Lease BONDURANT FEDERAL		Well No. 9
Unit Letter F.	Section 1	Township 19 SOUTH	Range 32 EAST	County NMPM LEA	

Actual Footage Location of Well:

2210	feet from the	WEST	line and	1650	feet from the	NORTH	line
Ground level Elev. 3703.3	Producing Formation Yates		Pool Buffalo		Dedicated Acreage 40 Acres		

1. Outline the acreage dedicated to the subject well by colored pencil or hectare marks on the plat below.

2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

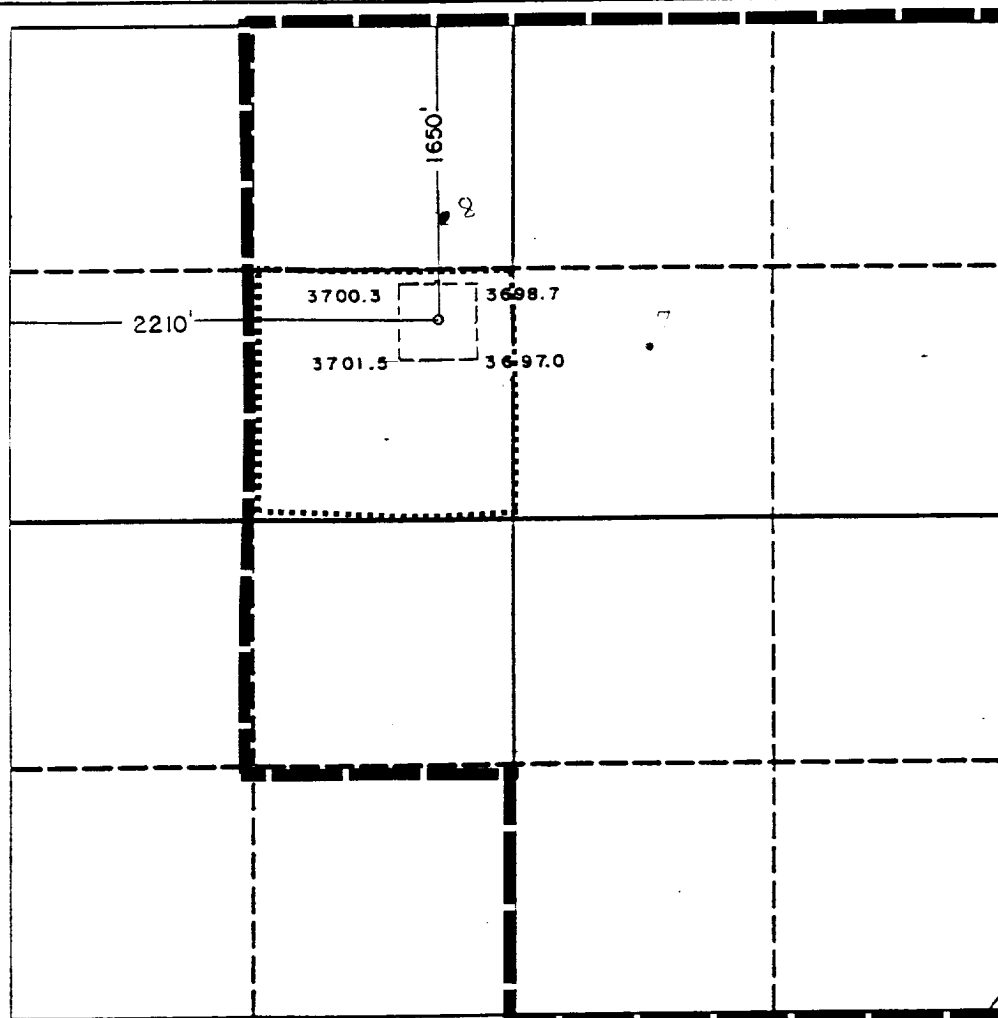
3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?

☐ Yes ☐ No

If answer is "yes" type of consolidation

If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature

Printed Name

Connie L. Malik

Position

Meridian Oil Inc.

Company

10/14/91

Date

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes, actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

9-13-91

Signature & Seal of
Professional Surveyor

Certificate No.



0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0

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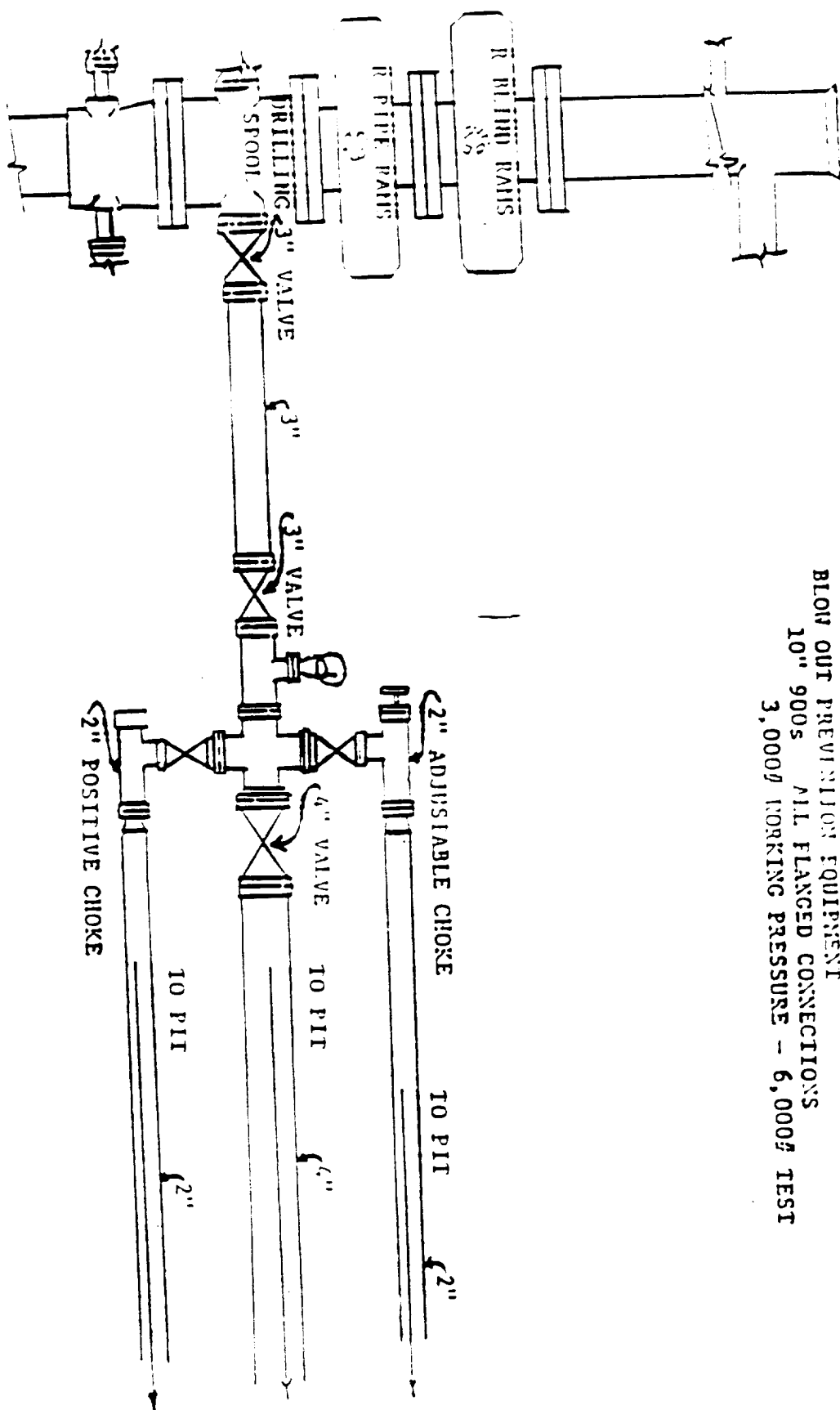
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AT 1000

OCT 31 1991

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OFFICE

BLOW OUT PREVENTION EQUIPMENT
 10" 900s ALL FLANGED CONNECTIONS
 3,000 PSI WORKING PRESSURE - 6,000 PSI TEST



APPENDIX TO FORM C-101

16-87-21 Y034

ELF

NOV - 2

NOV 1990

REC

OCT 31 1990

MOBILE OFFICE