

N. M. OIL CONS. COMMISSION
P. O. BOX 1060
HOBBS, NEW MEXICO 88240

Form 3160-5
(June 1990)

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.~~ Southland Royalty Co

3. Address and Telephone No.

P.O. BOX 51810 MIDLAND, TEXAS 79710-1810 915-688-6300

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SECTION: 20 554/S & 554/E

T-18-S, R-33-E

Unit P

5. Lease Designation and Serial No.

NM61604

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

SOUTH CORBIN FEDERAL #3

9. API Well No.

30-025-3153

10. Field and Pool, or Exploratory Area

Morrow Gas SOUTH CORBIN FIELD 9927

11. County or Parish, State

LEA, NM 8/1/93

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 REQUEST FOR EXTENSION

☐ 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 PER CONVERSATION OF 6/16/93, REQUEST FOR TWO (2) YEAR EXTENSION, REQUEST FOR THREE (3) YEAR EXTENSION, DUE TO CONTINUED WORK ON LEASE: TO SUBMIT FACILITY DIAGRAM + WATER DISPOSAL

WELL NO

PRODUCING FORMATION

LEASE NO

SECTION AVG WATER PRODUCED/PD/LEAS

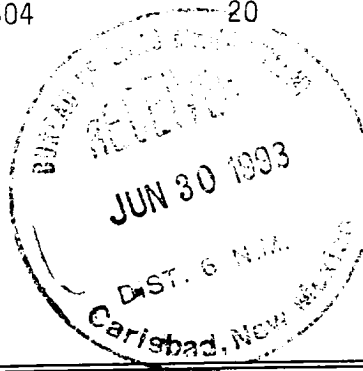
1
3

BONE SPRING
MORROW(GAS)

NM61604
NM61604

20
20

1.2 BOWPD



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

Signed

Title PRODUCTION ASSISTANT

Date 6/17/93

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

(ORIG. SEC.) JOE G. LUNA

Title

Date JUL 06 1993