

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. OIL CONS. COMMISSION  
P.O. BOX 1980  
HOBBS, NEW MEXICO 88240  
FORM APPROVED  
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 <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. <b>NM 12568 A</b>
2. Name of Operator <b>MERIDIAN OIL INC.</b>	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. <b>P.O. Box 51810 Midland, TX 79710 915-688-6943</b>	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>990' FNL &amp; 330' FEL</b>	8. Well Name and No. <b>BONDURANT</b> FEDERAL # <b>11</b>
	9. API Well No. <b>30-025-32432</b>
	10. Field and Pool, or Exploratory Area <b>BUFFALO YATES</b>
	11. County or Parish, State <b>SEC. 1, T19S, R32E</b>

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other <b>SPUD &amp; SET SURFACE CSG</b>	<input type="checkbox"/> 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.)  
**3/8/94: SPUD. DRLD A 12 1/4" HOLE TO 616'. RAN 14 JTS. 8 5/8" 28# K-55 BTC CSG AND SET @ 616'. USED FIVE CENTRALIZERS. CMTED W/370 SXS 'C' + 2% CACL2. CIRC. 50 SXS. WOC 12 HRS. BMPED PLUG 500 PSI. OK.**

*[Signature]*  
19 1994

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

Signed *[Signature]* Title **PRODUCTION ASSISTANT** Date **4/4/94**  
(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Conditions of approval, if any:

**RECEIVED**

**MAY 20 1997**

**JOHN HUBBS  
OFFICE**