APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

CONTACT RECEIVING
OFFICE FOR NUMBER

BLM Roswell District Modified Form No.

Form 3160-5 UNITED STATES				OF COPIES REQUIRED		NM060-3160-4		
July 1989) Formerly 9–331)		MENT OF THE INTER OF LAND MANAGEMEN		(Other instructions on reverse side)		5. LEASE DESIGNATION AND SERIAL NO. NM-56745		
(Do not use this for	m for proposals	CES AND REPORT s to drill or to deepen or plug N FOR PERMIT-" for such prop	back to a c		6. IF I	NDIAN, ALLOTTEE C	OR TRIBE NAME	
OIL X GAS (WELL X	OTHER				7. UNI	T AGREEMENT NAM	1E	
. NAME OF OPERATOR					8. FAF	RM OR LEASE NAME	F	
MERIDIAN OIL INC.					1	SHINNERY FEDERAL		
. ADDRESS OF OPERATOR				a. AREA CODE & PHONE NO.	9. WE	9. WELL NO.		
21 Desta Dr., Mi	5	915/686-5600	5	5				
 LOCATION OF WELL (Report location clearly and in accordance with a See also space 17 below.) At surface 				uirements.*	10. FIELD AND POOL, OR WILDCAT QUERECHO PL. (BONE SPRING)			
1650' FNL & 2310' FWL, SEC. 13, T18S, R32E						11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA		
					SEC	. 13, T18 S ,	R32E	
14. PERMIT NO.		15. ELEVATIONS (Show wi	hether DF, RT,	, GR, etc.)	12. CO LEA	DUNTY OR PARISH	13. STATE NM	
16.	Check Ap	ppropriate Box To In	idicate Na	ature of Notice, Re	eport, or C)ther Data		
NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:				
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)	TEST WATER SHUT-OFF PULL OR ALTER CASING FRACTURE TREAT MULTIPLE COMPLETE SHOOT OR ACIDIZE ABANDON* CHANGE PLANS			WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) SET & CMT CSG (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)			T* X	
work.)*	711'. LEA	y drilled, give subsurface loca AD: CMT W/750 SX C C SUPERLITE.						
						2: 1. 2.1 1.3	1 1. A.	
							in on	
							mom Vero	
			acca AL	PITED FOR RECO)RD	\$ 15	mo m m W m W	
			A.C	· 		\$ 13	mom Vero	