## Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

Orig. Signed by Paul Kautz Geologist

(This space for State Use)

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY -

Revised 1-1-89

MPR 02"

- DATE -

P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION	WELL API NO.
P.O. Box 2088  DISTRICT II  P.O. Drawer DD. Arteria NIA 88210  Santa Fe, New Mexico 87504-2088	30-025-30891
DISTRICT III	5. Indicate Type of Lease STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No. V-1357
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.)	7. Lease Name or Unit Agreement Name
I. Type of Well: OEL X GAS WELL X WELL OTHER	Mitchell "16" State
Name of Operator     Meridian Oil Inc.	8. Well No.
3. Address of Operator	9. Pool name or Wildcat
P.O. Box 51810, Midland, TX 79710–1810	Young Wolfcamp
400	554 Feet From The East Line
Section 16 Township 18S Range 32E NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING	
PULL OR ALTER CASING CASING TEST AND CE	
OTHER: Add Wolfcamp Perfs & Acidize X OTHER:	
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.	
Perforate the Wolfcamp at 10736' – 10760' (2spf, 50 holes). Spot 150 gallons 15% NEFe HCl acid. Place 1000 psi on 2–7/8" $\times$ 5–1/2" annulus. Monitor throughout the job. Pump w/2500 gals 15% NEFe HCl acid. Swab/flow test well.	
Perforate Wolfcamp at 10608' - 10624' (2 spf, 124 holes). Spot 250 gals 15% NEFe HCl acid. Pump w/6000 gals of 15% NEFe HCl acid. Swab/flow test well.	
Monitor surface pressure with chart recorder. TIH w/2-78" tbg. +/- 10600' of 2-7/8" tbg.	
I hereby certify that the information above is true and complete to the best of pry knowledge and belief.	
SKONATURE TIME Reg. Compliance	Rep. DATE 3/31/92
TYPEOR PRINT NAME Connie L. Malik	TELEPHONE NO. 915-688-689