

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-30985
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-1357
7. Lease Name or Unit Agreement Name Mitchell "16" State
8. Well No. 3
9. Pool name or Wildcat Young (Wolfcamp)

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.)

1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3787' GR.
2. Name of Operator Meridian Oil Inc.	
3. Address of Operator 21 Desta Dr., Midland, TX 79705	
4. Well Location Unit Letter G : 1650 Feet From The North Line and 2310 Feet From The East Line Section 16 Township 18 South Range 32 East NMPM Lea County	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: Set & Cement Casing <input checked="" type="checkbox"/>

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.

Spud well @0900 hrs. on 9/01/90.
9/01/90---Set 13-3/8" 54.5# K-55 buttress csg @364'. Cmt w/375 sx Class C w/2% CaCl2. Circulate 100 sx excess.
9/05/90---Set 8-5/8" 24# K-55 STC csg @2907'. Cmt w/1200 sx Class H Lite, 9 pps salt, & 1/4 pps Flocele. Tail in w/250 sx Class H Lite w/2% CaCl2. Circulate 200 sx excess.

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

SIGNATURE Robert L. Bradshaw TITLE Sr. Staff Env./Reg. Specialist DATE 17 September 90

TYPE OR PRINT NAME Robert L. Bradshaw TELEPHONE NO. 915-686-5678

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE SEP 19 1990

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

SEP 18 1990

NOV 1 1990