State of New Mexico

Submit 3 Copies Form C-103 to Appropriate District Office Energy, Minerals and Natural Resources Department Revised 1-1-89 DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION WELL API NO. P.O. Box 2088 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease STATEX FEE DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 6. State Oil & Gas Lease No. B-10268 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) BERN A 1. Type of Well: GAS X WELL OTHER 2. Name of Operator 8. Well No. MERIDIAN OIL INC 3. Address of Operator 9. Pool name or Wildcat P.O. Box 51810, Midland, TX 79710-1810 **EUMONT YATES 7 RVRS QUEEN** 4. Well Location Unit Letter P : 661 Feet From The SOUTH 660 Feet From The EAST __ Line and Line Section 14 Township hip 19S Range 36E 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 36E **NMPM** LEA County 3733' DF 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 OPNS PLUG AND ABANDONMENT **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB OTHER: OTHER: ACIDIZE & FRAC X 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. 8/21/91 WASHED PERFS FROM 3916-3945' W/ 15% NEFE ACID. CONT WASHING FROM 3830-3896' AND 3740-3810'. USED 5000 GALS NEFE ACID. 149,000 19 8/22/91 FRAC W/ 39000 GALS 40# LINEAR GEL W/ 50 QUAL CO2 FOAM & 12/20 BRADY SAND. 8/23/91 RIH W/ 2 3/8" TBG & SN. SET @ 3708'. 8/24/91 RIH W/ 2" X 1 1/4" X 12' RHBC PUMP. 9/5/91 TURN TO PRODUCTION.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE TO A COLOR TO TITLE PRODUCTION ASST	DATE 03/24/92
TYPE OR PRINT NAME ROXANN SCHOLZ	TELEPHONE NO. (915)688694
(This space for State Use) Orig. Signed by Paul Kautz Geologist	MAR 2.6 %
APPROVED BY Geologist, TITLE	DATE