Form 3160-5 (June 1990)

1. Type of Weil

2. Name of Operator

MERIDIAN OIL INC

3. Address and Telephone No.

UNITED STATES DEPARTMENT OF THE INTER **BUREAU OF LAND MANAGEM**

P.O. 80	X 198	0	
)88S,	NEW	MEXICO	88240
1	1	FORM APPROV	/ED T

...... OIL COMMISSION

	174 MEAICO 8824
1	FORM APPROVED
.	Budget Bureau No. 1004-0135

arch 31, 1993

Budget Bureau No. 1004-	013
R - C III - Expires: March 31, 19	93
5 Lase Disignation and Serial 1	No.

SUNDRY	NOTICES A	AND REPORTS	ON WELLS	Uct 7
Do not use this form for pro	posals to dri	ill or to deepen	or reentry to a diffe	rent reservoir.
Use "APPLI	CATION FO	R PERMIT - " fo	or such proposals	DOKE AU

SUBMIT IN TRIPLICATE

Oct 7 at	NMLC 031621A	
EUREAU OF L	Additional Allottee or T	ribe Name
HOODE	AND MGMT	
,	NH If Unit or CA, Agreem	ent Designation
	8. Well Name and No.	NO. 1

9. API Well No.

30-025-0596600

P.O. Box 51810, Midland, TX Location of Well (Footage, Soc., T., R., M., or Survey Des SE/SW OF SEC. 6, T20S, R37E		10. Field and Pool, or exploratory Area EUNICE MONUMENT
660'FSL 4 1980' FUL	_	11. County or Parish, State LEA NM
CHECK APPROPRIATE BOX(s)) TO INDICATE NATURE OF NOTICE, REPORT,	OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Abandonment	Change of Plans
Subsequent Report Final Abandonment Notice	Recompletion Plugging Back Casing Repair Altering Casing X Other STATUS	New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well

THIS WELL IS STILL PRESENTLY BEING EVALUATED FOR POTENTIAL TO DEEPEN WELL TO THE MCKEE. ANY ACTIVITY ON THIS WELL WILL NOT BE STARTED UNTIL AFTER THE FIRST OF THE YEAR.

THAPPROUND FOR 12 MONTH IN 1990

ENDING 4/1/95

14. I hereby certify that the foregoing is true and correct Signed	Title REGULATORY ASSISTANT	Date 10/6/94
(This space for Federal or State office use) Approved by CDIC SCD) INF G. 1 APPL Conditions of approval, if any:	Title PATRIELEUM E WALLEUM	- Date 1/10/94

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

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.)*