## Submit 3 Copies to Appropriate District Office

CONDITIONS OF AFFROVAL, IF ANY:

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

Form C-103

Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240  DISTRICT II P.O. Drawer DD, Artesia, NM 88210  OIL CONSERVATION DIVISION P.O. Box 2088  Santa Fe, New Mexico 87504-2088			WELL API NO. 30-025-31323
			5. Indicate Type of Lease STATE X FEE
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas Lease No. B-1398
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  SHELL STATE
1. Type of Well: ORL GAS WELL WELL X	OTHER		
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		EUMONT-YATES-7 RIVERS- QUEEN
4. Well Location Unit Letter B : 90	OO Feet From The NORTH	Line and	1830 Feet From The EAST Line
Section 36	Township 20-S		NMPM LEA County
	7////X	ver DF, RKB, RT, GR, etc.)	
Y/////////////////////////////////////	Appropriate Box to Indicat	e Nature of Notice, R	Report, or Other Data
NOTICE OF INT		SUE	SSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	G OPNS. X PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND C	EMENT JOB X
OTHER:		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.			
8-2-91 SPUDDED 12-1/4" HOLE. DRILLED TO 422'. RAN 10 JTS OF 8-5/8" 28# K-55 BTC CSG SET AT 422'. CMTD W/250 SXS C CMT + 2% CACL2, 0.25 PPS FLOCELE. CIRCD 53 SXS CMT TO PIT. USED 4 CENTRALIZERS AND ONE STOP RING. PRESSURE TESTED BOP AND CSG TO 600# FOR 30 MINUTES, O.K. WOC 18 HRS.			
LITE + A DDS SALT + 1/4DDS	FLOCELE TAILED W/470 S	SXS C PREMIUM PLUS	CSG SET @3700' CMTD/W 520 SXS CMT + 3 PPS SALT + 0.4% HALAD 344. 000 PSI FOR 30 MINUTES, O.K. WOC
		a and halfor	
I hereby certify that the information above is tr	be and complete to the best of my knowledge	DDOD ASST	DATE 10-23-91
SIGNATURE MARCHES	- 7-623	TITLE PROD. ASS1.	TELEPHONE NO. 915-688-6906
TYPE OR PRINT NAME MARIA L. PERI			TELEPHONE NO. 010-000-000
(Thus space for State One)	g. Signed by, aul Kauta Geologiat,	TILE	UGT 2 5 1991.

RECEIVED

OCT 24 1991

HOBBS CEROS