

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. CONS. COMMISSION  
P.O. BOX 1980  
HOBBS, NEW MEXICO 88249

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well

☐ Oil Well ☐ Gas Well ☐ Other DISPOSAL

2. Name of Operator

MERIDIAN OIL INC.

3. Address and Telephone No.

P.O. Box 51810 Midland, TX 79710

915-688-6943

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SEC. 14, T22S, R32E

542' FSL & 1958' FWL

5. Lease Designation and Serial No.  
NM 77058

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No. RED TANK

FEDERAL # 2 SWD

9. API Well No.

30-025-08113

10. Field and Pool, or Exploratory Area

WEST RED-TANK DEL/LBO

11. County or Parish, State  
LEA COUNTY, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other CASING INTEGRITY TEST

- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well 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.)\*

PLEASE FIND ATTACHED THE CHART FROM THE CASING INTEGRITY TEST. THE TEST WAS WITNESSED BY THE HOBBS/BLM OFFICE.

*S. Lara*

14. I hereby certify that the foregoing is true and correct

Signed Donna Williams

Title PRODUCTION ASSISTANT

Date 7/15/94

(This space for Federal or State office use)

Approved by \_\_\_\_\_

Conditions of approval, if any: \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

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.

\*See Instruction on Reverse Side

SWD-560

RECEIVED

AUG 1 9 1964

JO HUBBARD  
OFFICE