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

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.
30-025-31321

5. Indicate Type of Lease
STATE [X]   FEE [ ]

6. State Oil & Gas Lease No.
B-1167

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:
OIL WELL [ ]   GAS WELL [X]   OTHER

2. Name of Operator
Meridian Oil Inc.

8. Well No.
8

3. Address of Operator
P.O. Box 51810, Midland, TX   79710-1810

9. Pool name or Wildcat
Eumont Yates-7 Rivers-Queen

4. Well Location

Unit Letter O : 660 Feet From The South Line and 1780 Feet From The East Line

Section 32   Township 20-S   Range 37-E   NMPM   Lea   County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3650' GR

11.   **Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data**

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK [ ]   PLUG AND ABANDON [ ]

TEMPORARILY ABANDON [ ]   CHANGE PLANS [ ]

PULL OR ALTER CASING [ ]

OTHER: _____ [ ]

SUBSEQUENT REPORT OF:

REMEDIAL WORK [ ]   ALTERING CASING [ ]

COMMENCE DRILLING OPNS. [ ]   PLUG AND ABANDONMENT [ ]

CASING TEST AND CEMENT JOB [ ]

OTHER: Amend Total Depth on C-101 [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.

Amend total depth of well from 3650' to 3750'.

4-1/2" csg to be set at 3750' and cemented to surface.

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

SIGNATURE _Maria L. Perez_   TITLE Prod. Asst.   DATE 8-1-91

TYPE OR PRINT NAME Maria L. Perez   TELEPHONE NO. 915-686-5767

(This space for State Use)

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: