State of New Mexico

Form C-103 Submit 3 Copies Energy, Minerals and Natural Resources Department to Appropriate District Office Revised 1-1-89 OIL CONSERVATION DIVISION DISTRICT I P.O. Box 1980, Hobbs, NM 88240 WELL API NO. P.O. Box 2088 30-025-31653 Santa Fe, New Mexico 87504-2088 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE FEE 🗔 DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. V-2387 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.) DAGGER LAKE STATE Type of Well: WELL X OTHER & Well No. 2. Name of Operator MERIDIAN OIL INC. 3. Address of Operator 9. Pool name or Wildcat P.O. Box 51810, Midland, TX 79710-1810 WILDCAT 4. Well Location 1980 Feet From The EAST : 330 Feet From The SOUTH Unit Letter 0 Line and hip 22-S Range 33-E

10. Elevation (Show whether DF, RKB, RT, GR, etc.) NMPM LEA County Section 5 Township 22-S 3646.8' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: **ALTERING CASING** PLUG AND ABANDON REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ABANDONMENT COMMENCE DRILLING OPNS. **CHANGE PLANS** TEMPORARILY ABANDON **CASING TEST AND CEMENT JOB PULL OR ALTER CASING** OTHER: SET INTERMEDIATE & PROD. CSG 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. 8/12/92 DRILLED 12-1/4" HOLE TO 4500'. RAN 104JTS 8-5/8" 28# & 32# K-55 BTC CSG SET @ 4486'. CMT'D W/1850 SXS "C" LITE + 6% GEL + 9 PPS SALT + 1/4 PPS FLOCELE, TAILED W/250SXS "C" + 2% CACL2 CIRC'D 300SXS CMT TO SURF. TEST TO 1500# FOR 30 MINS, O.K. WOC 18HRS. USED 14 CENTRALIZERS.

8/29/92 DRILLED 7-7/8" HOLE TO 8810'TD. RAN 212 JTS OF 5-1/2" 17# N-80 & K-55 LTC CSG SET @ 8810' CMT 1ST STAGE W/ 975 SXS "H" 50/50 POZMIX + .5% HALAD - 322. DV TOOL @ 6011.2'. CMT 2ND STAGE W/700 SXS 50/50 POZMIX 2% GEL + 2#SK SALT + .5% HALAD - 322. TEST TO 1500PSI FOR 30 MINS, O.K. RAN CBL, TOC @ 2580', WOC 2 USED 10 CENTRALIZERS.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. DATE 10-21-92 TITLE PRODUCTION ASST. TELEPHONE NO. 915 688 6906 TYPE OR PRINT NAME MARIA L. PEREZ ORIGINAL SIGNED BY JERRY SEXTON (This space for State Use) OCT 26'92 DISTRICT I SUPERVISOR

DATE -

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY-

days