

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING
OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on reverse
side)

BLM Roswell District
Modified Form No.
NM060-3160-4

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-" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		N. M. OIL CONS. COMMISSION		5. LEASE DESIGNATION AND SERIAL NO. NM 81633	
2. NAME OF OPERATOR MERIDIAN OIL INC.		P. O. BOX 1980 HOBBS, NEW MEXICO 88240		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 51810, Midland, TX 79710-1810		3a. AREA CODE & PHONE NO. 915-688-6800		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface O, 330' FSL & 1650' FEL				8. FARM OR LEASE NAME CHECKERBOARD 23 FEDERAL	
				9. WELL NO. 2	
				10. FIELD AND POOL, OR WILDCAT RED TANK BONE SPRING	
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 23, T-22S, R32E	
14. PERMIT NO. 30-225-31807		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3729.9		12. COUNTY OR PARISH LEA	
				13. STATE NM	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL

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PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANS

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(Other) FISH PARAFFIN KNIFE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other)

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REPAIRING WELL
ALTERING CASING
ABANDONMENT*

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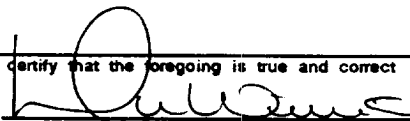
(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. 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.)*

1. MIRU SERVICE UNIT. 2. MIRU ACID ENGINEERING. KILL WELL W/2000 GAL AE AROMATIC SOLVENT. DISPLACE SOLVENT TO TOP PERFORATION WITH 2% KCL WATER. 3. RELEASE GIBBERSON UNI-V PACKER. POOH WITH +/- 156 STANDS (9850') OF 2 7/8" 6.5# n-80 TUBING AND PACKER. 4. RIH WITH BAILER AND BAIL SAND TO PBTD AT +/- 9985'. 5. PU PACKER AND 2.25" ID SN ON +/- 9850' OF 2 7/8" 6.5# N-80 TUBING. REVERSE PACKER FLUID INTO ANNULUS. ND BOP. NU WELLHEAD. SET PACKER AT +/- 9850'. 6. SWAB WELL. IN. RDMO SERVICE UNIT REQUESTING VERBAL APPROVAL TO COMMENCE PROCEDURES.

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

SIGNED



TITLE

PRODUCTION ASSISTANT

DATE

7/2/93

(This space for Federal or State office use)

APPROVED BY

(ORIG. SGD) DAVID R. GLASS

TITLE

PETROLEUM ENGINEER

DATE

JUL 08 1993

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

RECEIVED

JUL 8 1993

QUADRA
BY [illegible]