State of New Mexico Form C-103 Submit 3 Copies Energy, Minerals and Natural Resources Department to Appropriate District Office Revised 1-1-89 DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION WELL API NO. P.O. Box 2088 30-025-32195 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe. New Mexico 87504-2088 5. Indicate Type of Lease FEE X STATE DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. 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.) **MATTIE JAMES** Type of Well: GAS X OEL WELL OTHER 2. Name of Operator 8. Well No. MERIDIAN OIL INC. # 4 3. Address of Operator 9. Pool name or Wildcat P.O. Box 51810, Midland, TX 79710-1810 JALMAT TANSIL YTS 7RVRS PRO GAS 4. Well Location : 660' Feet From The NORTH 660' Feet From The EAST Unit Letter A... Line and \_ Line Township 22S Range 36E NMPM LEA Section 10 County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3562.7 GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK **ALTERING CASING CHANGE PLANS** COMMENCE DRILLING OPNS. **TEMPORARILY ABANDON** PLUG AND ABANDONMENT CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** OTHER: SET SURFACE 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. 2/24/94: SPUD. DRLD A 12 1/4" HOLE TO 405'. RAN 9 JTS 28# K-55 BTC CSG. SET AT 405'. USED FOUR CENTRALIZERS. CMTED W/325 SXS 'C' + 2% CACL2. WOC 18 HRS. BMPED PLUG 500 PSI. OK **CIRC. 127 SXS** 

APPROVED BY CONDITIONS OF APPROVAL, IP ANY:		
A PARAMETER S.V.	ORIGINAL SIGNAL STRANGE OF TRANSPORT OF THE DISTRICT F SUPERVISOR	DATAPR 13 1994
(This space for State Use)	ORIGINAL SIGNED BY JERRY SEXTON	
TYPEOR PRINT NAME DONNA WILLIAMS		TELEPHONE NO. 915-688-6943
SKINATURE LUCE DE LA CONTROL D	TITLE PRODUCTION ASSISTANT	DATE 3/25/94
I hereby certify that the information above is true and complete to the best of my knowle	dge and belief.	
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