

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.A. OIL CONS. COMMISSION  
P.O. BOX 1980  
HOBBS, NEW MEXICO 88240

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**

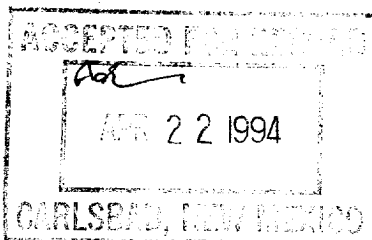
1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	7. If Unit or CA, Agreement Designation
2. Name of Operator MERIDIAN OIL INC.	8. Well Name and No. CHECKERBOARD 23 FEDERAL # 6
3. Address and Telephone No. P.O. Box 51810 Midland, TX 79710 915-688-6943	9. API Well No. 30-025-32375
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) M, 879' FSL & 403' FWL SEC. 23, T22S, R32E	10. Field and Pool, or Exploratory Area WEST RED TANK DELAWARE
	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	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other SET INTERMEDIATE CSG	<input type="checkbox"/> 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.)  
DRILD A 12 1/4" HOLE TO 4540'. RAN 104 JTS 8 5/8" 28#/32# K-55 BTC/LTC CSG AND SET AT 4540'. USED SIXTEEN 16 CENTRALIZERS. CMTED W/1ST STAGE: LEAD: 600 SXS 'C' LITE + 9 PPS SALT + 5 PPS GILSONITE. TAIL W/250 SXS 'C' + 2% CACL2. CIRC 100 SXS. 2ND STAGE: CMTED W/650 SXS 'C' LITE TAIL W/200 SXS 'C'. DID NOT CIRCULATE. CLOSED DV TOOL. WOC 19 HRS.



RECEIVED  
APR 11 9 25 AM '94  
CARLSBAD, NEW MEXICO

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

Signed Donna Williams

Title PRODUCTION ASSISTANT

Date 4/7/94

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date

**RECEIVED**

**APR 20 1994**

**OCD HUMAN  
OFFICE**