

Submit 3 Copies
to Appropriate
District Office

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. 30-025-04538
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. NM-890C
7. Lease Name or Unit Agreement Name Shell E State Com.
8. Well No. 1
9. Pool name or Wildcat Eumont (Yates-7Rvrs-Queen)
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3571' GR

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.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER
2. Name of Operator Meridian Oil Inc.
3. Address of Operator P.O. Box 51810, Midland, TX 79710-1810
4. Well Location Unit Letter J : 3300 Feet From The North Line and 1980 Feet From The East Line Section 6 Township 21-S Range 36-E NMPM Lea County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3571' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: Refracture stimulate Queen <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

Clean out hole with foam if necessary to PBTD 3526' . Acidize Queen w/1000 gls 7-1/2% NEFE HCl acid and 36 7/8" RCMBs. Fracture stimulate Queen w/24,000 gallons of 50-Quality CO2 foam and 72,000 bls of 12/20 mesh Brady sand. Clean out to PBTD with foam. Put on production.

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

SIGNATURE Maria L. Perez TITLE Production Asst. DATE 7-18-91

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

(This space for State Use) JOHN L. SEXTON
COMMISSIONER

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JUL 22 1991

440
HOBBS OFFICE