

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.
30-025-09085

5. Indicate Type of Lease
STATE ☐ FEE ☒

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
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
OIL WELL ☐ GAS WELL ☒ OTHER

2. Name of Operator
MERIDIAN OIL INC.

3. Address of Operator
P.O. 51310, Midland, TX 79710-1810

7. Lease Name or Unit Agreement Name
B.A. CHRISTMAS

8. Well No.
1

9. Pool name or Wildcat
JALMAT (TANSIL, YTS, 7RVRS)

4. Well Location
Unit Letter **L** : **1650'** Feet From The **SOUTH** Line and **330'** Feet From The **WEST** Line

Section **28** Township **22S** Range **36E** NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3508'

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: **EXTEND APPROVAL TO PLUG** ☐

SUBSEQUENT REPORT OF:

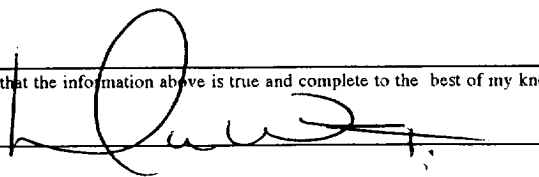
REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

MERIDIAN OIL INC. RESPECTFULLY REQUEST APPROVAL TO EXTEND THE TIME ON THE NOTICE OF INTENT TO PLUG AND ABANDON THAT WAS APPROVED JANUARY 6, 1994. (PLEASE SEE ATTACHED COPY OF SAID APPROVAL)

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

SIGNATURE



TITLE **REGULATORY ASSISTANT**

DATE **1/27/95**

TYPE OR PRINT NAME **DONNA WILLIAMS**

TELEPHONE NO. **915-688-6943**

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

FEB 01 1995

10 12 1995

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JUN 11 1963

U. S. HOUSE
OFFICE